

OUR TOWNS: A CLOSE-UP

OUR TOWNS

A CLOSE-UP

A study made in 1939-42
with certain recommendations by the
Hygiene Committee of the
WOMEN'S GROUP ON PUBLIC WELFARE
(in association with the
National Council of Social Service)

With a Preface by

THE RT. HON. MARGARET BONDFIELD, J.P., LL.D.
CHAIRMAN OF THE GROUP.

OXFORD UNIVERSITY PRESS
LONDON . NEW YORK . TORONTO

OXFORD UNIVERSITY PRESS
AMEN HOUSE, E.C. 4
London Edinburgh Glasgow New York
Toronto Melbourne Capetown Bombay
HUMPHREY MILFORD
PUBLISHER TO THE UNIVERSITY

First published . . . *March 1943*
Second Impression . . . *May 1943*
Third Impression . . . *July 1943*
Fourth Impression . . . *October 1943*

148304

Y133:42t56:N3P.
H3

Printed in Great Britain

“ Thus in regarding the conditions of life at their worst, and in seeking to improve them, there are two distinct tasks : to raise the general level of existence, but especially at the bottom level, is one ; to increase the proportion of those who know how to use aright the means they have is another and even a greater. Both such efforts should aid the other.”

CHARLES BOOTH,
Life and Labour in London, final vol., p. 201.

ACKNOWLEDGMENTS

Thanks are due to Messrs. P. S. King & Staples, Ltd., for permission to print the passage from *The New Survey of London Life and Labour*, which forms Appendix II; and to the Birmingham, Kent and Liverpool Education Committees for the extracts from Reports of their School Medical Officers given in Appendices III, XI and XIII.

The Women's Group on Public Welfare wish also to thank the Russell Sage Foundation of New York for a generous donation which was a considerable help in the preparatory stages of this book, and to record with gratitude the invaluable help given by Mrs. St. Loe Strachey in the final preparation of the book for publication.

PREFACE

THIS book will be, I hope, the last of its kind. It exposes a weakness which runs through a great deal of the effort to reform certain bad conditions of living. We are too easily satisfied with the top crust of results. A housing crusade secures a scheme of slum clearance and lo! a bright patch of town planning to which we bring enquiring visitors. We accept their congratulations and too often our crusading zeal ends at that point. But it is patchwork reform, and so often the pieces do not fit.

We must take the needs of the community as a whole, get right down to foundations and build a co-ordinated structure of services which leaves no gap. Education—physical, mental and social—must be the birthright of all. Health work in the schools must not be nullified by constant threat to health in the home surroundings and habits in such slums as are herein described. A high sanitary standard for both home and person must be made possible for all.

May we learn the lesson that it is not high spots that are required so much as continuous common-sense work day by day—using the power of the law where it is adequate; extending this power where needful, but always working to secure co-operation between authority and the citizen for the sake of the community.

MARGARET C. BONDFIELD

*Chairman, Women's Group
on Public Welfare*

The Hygiene Committee of the Women's Group on Public Welfare was composed as follows :—

Chairman : Miss Amy Sayle, M.B.E., M.A., L.C.C. ; Women Public Health Officers' Association.

Secretary : Miss M. L. Harford, Chief Woman Officer, National Council of Social Service.

Members : Mrs. John Barclay, B.A., F.S.I., Society of Women Housing Managers.

Miss E. Fabian Brackenbury, B.A. (served to 1940),
Lecturer in Health Education, Avery Hill Training
College ; Ling Physical Education Association.

Miss P. Spafford (served from 1940), Organising
Secretary, Ling Physical Education Association.

Miss Elizabeth Denby, Hon. A.R.I.B.A., Housing
Consultant.

Miss D. Ibberson, Civil Servant.

Mrs. Henry Haldane (served to 1940), National Federa-
tion of Women's Institutes.

Miss Cicely McCall (served from 1940), National
Federation of Women's Institutes.

The book has been written in the main
by a member of the Committee who
wishes to remain anonymous, and no
organisation is bound by the opinions
expressed in it.

CONTENTS

	PAGE
PREFACE by the Rt. Hon. Margaret Bondfield	vii
INTRODUCTION	xi
CHAPTER I. EVACUATION : THE WINDOW THROUGH WHICH TOWN LIFE WAS SEEN	I
CHAPTER II. LIVING BELOW STANDARD (1)	9
(a) Wrong Spending—(b) Bad Sleeping Habits—(c) Bad Feeding Habits—(d) Juvenile Delinquency and Want of Discipline—(e) Dirty and Inadequate Clothing	
CHAPTER III. LIVING BELOW STANDARD (2)	66
(a) Lice—(b) Skin Diseases—(c) Insanitary Habits— (d) Bodily Dirtiness	
CHAPTER IV. THE FUTURE HOPE	101
1. Education	104
2. Environment	110
3. Conclusion	111
BIBLIOGRAPHY	112

APPENDICES

APPENDIX	
I. List of Witnesses interviewed	114
II. "A Worker's Family Life from the Inside," from <i>The New Survey of London Life and Labour</i>	114
III. Special Investigation of Nutrition by the School Medical Service, Birmingham	116
IV. L.C.C. Report on Relative Merits of Nursery Classes and Nursery Schools	121

APPENDIX	PAGE
V. Note on the Memorandum of Evidence submitted by the Association of Teachers of Domestic Subjects to the Board of Education's Departmental Committee on the Teaching of Domestic Subjects in Public Elementary Schools	122
VI. A Note on Problem Families	123
VII. Clothing Clubs	124
VIII. Presentation of Statistics relating to "Uncleanliness" in London Elementary Schools	126
IX. Notes on Health Visitors' Work in connection with Pediculosis, by Miss Cooper Hodgson	128
X. Problems of Character: Constructive Treatment of Slum Character in Vienna, by Miss Elizabeth Denby	130
XI. Result of School Medical Inspection in Aylesham, by Dr. F. Wolverson, Kent L.E.A.	132
XII. Bed-wetting, Note by Miss A. M. Maynard	134
XIII. Health Education, Extract from the Report on the Work of the School Medical Service, Liverpool, 1938	136
XIV. Comparison between Mortality Rates in Northern and other Towns	139
INDEX	140

INTRODUCTION

It will quickly be appreciated that this book is a thinly disguised Report with no pretensions to literary merit. It is addressed to readers with stout stomachs and an appetite for facts, including the unpleasant. Though it deals with evacuation in wartime, no attempt is made to write the history of that emergency expedient. Its significance to the authors' work is merely that of a window through which English town life was suddenly and vividly seen from a new angle.

The investigation originated as a result of representations made to the Women's Group on Public Welfare by the National Federation of Women's Institutes that the domestic habits and customs of a minority of town-dwellers, disclosed by evacuation, should be explored.

The plan of the volume is to take the accusations levelled against the evacuees one by one and examine what evidence exists to support them and whether they can justly be brought by the countryside against the town. It then seeks to relate these accusations to urban conditions and to suggest means which might be sought to remedy the defects complained of. The complaints have not been taken in the order of their vehemence and universality; for, recognising that much has already been written on lice and bed-wetting, the authors have begun with other subjects on which they felt they had perhaps a more important contribution to make.

The book, therefore, represents the attempt of a small group of working professional women, all familiar at first hand with the conditions of poverty, to make a nation-wide survey of the conditions of town life in England which might be held responsible for those features in the physical condition, habits and conduct of the evacuees which were the subject of complaint by their hostesses.

No social survey of England as a whole exists, although a limited number of surveys have been made locally. R. Titmuss¹ has made a most interesting examination of national statistics bearing upon social conditions, but there is no one work comparing data, from observation as well as statistics, of the social conditions of town and country, north and south, cities and small towns, and one city and another. Anyone desiring to know how people in various parts of England feed and clothe their children; the state of water

¹ R. M. Titmuss, *Poverty and Population* (Macmillan), 1938.

supply and sanitation in their houses ; what use their local authority makes of its permissive powers under the Public Health, Education and other Acts ; whether their schools are well built and modern or antiquated and insanitary ; the state of their health, the local prevalence of mental and physical defect and of particular diseases ; the extent of poverty amongst them ; their ways of spending income ; their habits in the home, superstitions, physical peculiarities and manner of speech must consult a mass of blue books and specialist works, and even so meet with only partial success.

Evacuation was, however, carried out nationally, and the scope of this work must therefore be national too. None of its authors could profess to knowledge on a national scale of more than a special aspect of the problem, and the extent to which they were able to extend their field by hearing witnesses was limited by the time at their disposal and the fact that they were without funds. Twenty-seven witnesses, some from the provinces, were, however, heard, including Health Visitors, Housing Managers, Teachers, Social Workers, Billeting Officers, Civil and Local Government servants (see Appendix I). They were for the most part experienced field workers. Owing to their close personal contact with the problems discussed, their knowledge and wisdom threw invaluable light upon the authors' task.

It appears that tenderness for the susceptibilities of local government often withholds central government departments from publishing such information as they possess in a form related to particular local authorities, and this is both a handicap to research and a bar to progress. Some local statistical and other data in this book have been derived from the reports of School Medical Officers. The authors suggest, however, that a useful pointer to the country's black spots is the Report of the Overcrowding Survey, 1936. This shows overcrowding to be closely associated with industry. Central London and the North-East (Northumberland and Durham) emerge as pre-eminently the problem areas. It is evident from the Survey that the big towns have a formidable and sinister number of overcrowded families—London had, at that time, more than 70,000 overcrowded *houses*, almost all in the central boroughs, and Liverpool 11,500—and also that many smaller industrial communities such as Hebburn, where more than one working-class house in four was overcrowded, and the mining villages in so-called rural districts such as Easington, have social conditions requiring the most urgent attention. A contrast might, therefore, from some points of

industrial and agricultural areas than those of "town" and "country." We have, however, focused this study upon conditions in the larger towns because they furnished the bulk of the evacuees. The large towns do, in fact, show a picture more complex than that of smaller communities since their very size encourages special problems such as juvenile delinquency and some forms of mis-spending which hardly affect small towns and villages. Nevertheless, no policy of post-war reconstruction ought to be formulated without a national survey of social conditions which will enable attention to be focused upon places, large and small, where there exist "the conditions of life at their worst." The chain should first be strengthened in its weakest links.

Meanwhile there is room for much work on the lines of Titmuss's interesting correlation of all statistics bearing upon social conditions. Citizens are invited to probe the conditions of their own towns by ascertaining from the local authority the most overcrowded wards, and comparing the relevant facts as to housing; infantile and child mortality; health; school premises and hygiene; lice and skin diseases amongst schoolchildren; and delinquency, especially juvenile, with those relating to other wards.

Two things stand out about the complaints investigated—they related to only a small proportion of the evacuees; and they were nation-wide and concerned some of those from every area evacuated. Some parties which were the subject of bitter complaint came, it seems, from the smaller industrial and coastal towns, the social conditions of which have been little studied and are hardly known beyond their own boundaries. The effect of evacuation was to flood the dark places with light and bring home to the national consciousness that the "submerged tenth" described by Charles Booth still exists in our towns¹ like a hidden sore, poor, dirty, and crude in its habits, an intolerable and degrading burden to decent people forced by poverty to neighbour with it.

Within this group are the "problem families," always on the edge of pauperism and crime, riddled with mental and physical defects, in and out of the Courts for child neglect, a menace to the community, of which the gravity is out of all proportion to their numbers. It is a serious matter that no study of this class of the population exists, and if this book serves only to focus attention upon the need for one, the authors will be well satisfied.

¹ The Report of the Mental Deficiency Committee (H.M.S.O.), 1929, refers to "a group which may be described as the subnormal or social problem group, representing approximately 10 per cent. of the whole population." (Part I, pp. 92-3.)

Next to the problem families come those which may be described as grey rather than black ; they are dirty and unwholesome in their habits through lack of personal discipline and social standard, often combined in the past or present with poverty and discouraging environment. Most of them are capable of improvement in better circumstances and if better educated in a wide sense. It is of great importance that their problem, too, should be studied, as they exert a gravitational pull on those around them ; unless good leadership is to hand, young people tend through fear of priggishness and "superiority" to take their standard of conduct from the lowest common level of their group.

The conditions of extreme poverty are generally quite unknown to the ordinary citizen, who, although he may sometimes walk through the poorer streets, has no occasion to penetrate into the homes which line them. Nor does the mountain come to Mahomet, for the lives of the poorest are often circumscribed to an extreme degree ; they, especially the women, rarely leave the few mean streets of their immediate neighbourhood, and the greater their poverty or shiftlessness, the less willing are they to venture forth.

The "submerged tenth" escapes most social effort ; its members seldom join trade unions, friendly societies, classes or clubs ; they seldom attend places of worship. Their importance as a social factor has received inadequate attention.

With the noble exception of Charles Booth's great work, its successor and the Merseyside Survey, social surveys have tended to concentrate mainly upon an examination of the material aspects of poverty through the factual analysis of income, sickness, housing, recreational facilities, etc. The authors of this book, whatever their attitude in undertaking the work, came unanimously, as Booth had done before them, to regard the problem of improving social conditions as one of education as much as of environment. They have no doubt that, side by side with an unremitting campaign for better material conditions, more effort should be made to rouse and strengthen the human will, both subconscious and conscious, and enlist it in co-operative effort for decent living.

The comparative unhealthiness of the industrial towns is a commonplace to those who study Blue Books. The manufacturing areas generally have a higher death-rate, higher infant mortality, and higher child mortality, especially amongst young children but also throughout the school years, than the country towns, and these again generally show higher figures than the rural districts. The

Registrar-General,¹ that cautious commentator, explains this as due to :

The crowding together of houses in towns.

The crowding together of people into houses too small for them.

The aggravation by town conditions of the ill effects of poverty on standards of living and environment.

The effects of smoke in robbing the towns of sunshine.

The outer ring of London and such modern towns as Willesden or Coulsdon and Purley (the latter two jointly about the size of Jarrow) are exceptions. They show favourable statistics, and, except for the ugliness of ribbon building, it is here, if anywhere, that a way of creating the pleasant and healthy town conditions of the future has been foreshadowed.

The problem of good working-class housing and open spaces in towns is much aggravated by the exploitation of land values, a social question requiring urgent attention.

Whatever may be said hereafter to show that poverty, like unemployment, may in individual cases be personal rather than economic, and also that some of the complaints against the evacuees affected persons who were not poor but socially uneducated, this book must be read against the background already provided from other sources. The Social Surveys of Merseyside, Sheffield, Bristol and Southampton have shown a proportion of from 12 to 15 per cent. of their families or 22 to 30 per cent. of their children as living below the poverty line. This means that they had not enough money for the mother, even if she were a perfect housewife, to pay for the bare essentials of rent, food, clothing, fire, light and cleaning materials necessary to keep her family in health. Sir John Orr² has calculated that in 1936 one-tenth of the nation's population, including nearly one in four of its children, spent only 4s. weekly a head on food and had a dietary lacking in all the constituents most essential to health. Poverty has been abundantly and distressingly proved in the towns.

It would, of course, be altogether false to romanticise the countryside as free from poverty, the burden of which has been but lately lifted from the agricultural worker whose life it has depressed and narrowed over the years.³ Recently, health statistics from the poorest rural areas, taken in isolation, were worse in some respects

¹ Quoted in Report of the Royal Commission on the Distribution of Industrial Population, 1935, p. 57.

² *Food, Health and Income*, by Sir John Boyd Orr (Macmillan), 1936.

³ See Parliamentary debates on the Agricultural Wages (Regulation) Bill, 1924, and B. S. Rowntree, *How the Labourer Lives* (Longmans), 1913.

than those of the worst and most congested towns.¹ In the extreme of poverty, food matters more to the human organism than living conditions, and the countryside helps children to profit by good food, not to dispense with it.

As regards personal conditions and habits, however, the special town conditions of overcrowding, lack of open spaces, smoke and noise have done their work, and the country was entitled to complain of the town's shortcomings. Overcrowding is not only a destroyer of health and a spreader of disease; perhaps its worst effect is to debase family life. It is distressing to read of the babies' class in a poor London school,² that only one in five of the children had good homes, while one-third had homes which the Care Committee workers regarded as unsatisfactory. It is shocking to learn that in the big cities, the children with the lousiest heads are those under five years of age, and that the five-year-old school entrant already suffers from all the complaints that the school medical service will spend its energies in combating during his school life. In the deep country, however, homes are better, infants and toddlers are rarely found verminous, and the diseases of dirt are not a serious matter. The slum townswoman's child is in general worse cared for in every way than the poor cottager's.³ For one thing—now perceived in all its importance—the country child gets more and better sleep, which is one of the keys to good health, good appetite and nervous stability. "I feel so well and happy here," said one little evacuee. "I think it must be the lovely, long sleeps we get."

Hostesses were entitled to look with horror upon the worst of the town mothers and children as something they could not have conceived in the England of to-day. The dreadful lesson of evacuation was the light it threw upon the home conditions of the lowest of the town dwellers. The task laid upon the authors of this book was to explore those conditions, and they have done so unsparingly. They have looked at the child who sleeps at unseemly hours and runs late and breakfastless to school; who has head lice, impetigo, scabies; who is unwashed and incontinent; who lies and pilfers. They have looked at him, as England was forced to look at him, with shame and a burning sense of neglect and wrong, and they have sought to suggest means whereby this degradation of childhood can be avoided and the home of the future made, even at its humblest,

¹ See "Epidemiology of Juvenile Rheumatism," Morris and Titmuss, *Lancet*, July 11, 1942.

² See App. IV.

³ See, however, the Report of the Mental Deficiency Committee, 1929, which found the home conditions of mental defectives worst in the isolated dwellings of rural districts. (Part IV, p. 131.)

a better place. To a nation with a falling birth-rate the salvation of every child is more than ever vital.

Every road travelled has led them to emphasise the need to guide the child's formation in its early years. Every section leads to a plea for the nursery school where habits can be formed, health and nutrition safeguarded, and the tender mind ineradicably influenced for good at an age when lessons imprint themselves on the sub-conscious as well as the conscious mind. It is through tiny children that parents can best be reached and taught; Victorian melodrama was quite right in its sentimental insistence on the power for good of the "che-ild"; for the child is not only father of the man but often the only teacher to whom he will listen. The extension of child care in any form gives girls a wider field for work which is emotionally satisfying and a training for home-making and motherhood. Perhaps no education is capable of making so rich a return to the community.

This plea for earlier and better education is strengthened by the knowledge that the grounds of complaint against the townsfolk were not confined to the "submerged tenth." Toleration of vermin in the hair proves to be far more widespread than has been suspected, and since this is not a disease but a form of dirtiness which is within everyone's power to control, this indicates a corresponding need to raise standards amongst many young people and their parents.

Other complaints concerned laziness, greediness, ungraciousness and selfishness, which are not confined to any one class of the community; it is difficult to say whether they are more prevalent in the town than in the country, and whether the complaints arose merely because the evacuees left the bosom of their families to come under the more critical eye of strangers. However that may be, evacuation left us nationally dissatisfied with ourselves as the product of a first half-century of compulsory education, and with a deep-seated conviction that better social instruction is needed by all classes, and that they should acquire it side by side in the same institutions, growing up with a common conception of rights and duties. It has been well said that education is "not the state's gift, but the state's need". But it must come not only from the school but also from the home and the factory, and in a hundred invisible ways. We must try to build the educative community.

If the question were put: Why did the disclosures of evacuation produce such a degree of shock and scandal? the answer is probably that, with the increasing stream of social legislation passed in the last thirty years, and the visible improvement in the condition

of the poor, the ordinary citizen had come to believe that all was well with our society. This was, perhaps, a natural belief, for the progress made has been great and the powers conferred by legislation sufficiently far-reaching to ensure even greater changes had they been fully used. But those who have done personal investigation know the extraordinary difference between looking at schemes from above downwards and from below upwards. A local authority, invited to describe its health services, may make, with all conviction, an imposing statement of the facilities available ; yet within its area large numbers of poor people may be found sorely in need of those services yet unaware that they exist, or deterred from using them by harsh or wooden administration or unacceptable personnel, or by personal difficulties, such as inability to provide fares or attend at awkward hours, which have not been provided against. There will probably be gaps in the services visible only to the expert, where permissive powers have not been used ; and moreover it will all too often be found that both local and central government have failed adequately to publicise their schemes, perhaps for fear of the resulting cost. The public is not fully aware of these issues and needs to know more, both of the limitations of existing legislation, and the shortcomings in its administration.

The campaign for better education, academic, social and moral, must be waged side by side with the battle against poverty and bad material conditions. Character, especially if supported by the unmeasured and tremendous force of tradition, can and does triumph astonishingly over both poverty and squalor. But these are dysgenic and socially disgraceful. Poverty must be attacked from many angles by ensuring security and continuity of employment at wages sufficient to permit of health and enjoyment ; children's allowances ; price control of basic commodities ; a national medical service designed to lift the crushing burden of ill-health and disability which is one of the most distressing sources and symptoms of poverty ; and a fuller study and control of commercial exploitation. Material conditions should be improved in the home, the school and the playground. The mingling of the classes should be sought in housing as in education. Central government should be given powers to bring all schools up from their now sometimes disgraceful condition to a standard permitting of the social education of their scholars ; there should be country schools for all, and parks, playgrounds and swimming pools in the poorest quarters of towns.

The great towns are industrial centres ; their conditions cannot be considered without reference both to the responsibility of trade

and industry in the past and their duty in the present. The slums are largely the result of low wages and insecurity, and it should no longer be open to private selfishness to perpetuate these evils. Trade and industry must take their place as servants, not masters, of the community, recognising a duty not only economic but moral.

The means of education are manifold: working women's clubs, people's restaurants, youth organisations, health centres, travel associations, wide streets, good architecture, both grand and modest in scale, noble trees, and fellowship with good citizens whose code is written in their lives. All these the wise society must seek to provide for its members. But it should not neglect to watch what commerce, with its unerring flair for "market" (otherwise need), does in fact successfully provide—the fun-fairs, football pools, chain cinemas, holiday camps, beauty parlours, cheap confectionery and "comics"—in order to see whether abuses should be checked or better alternatives provided. Commerce is wholly realistic—it does not appeal to the motives which ought to move people but to those which actually do: the desire of parents to please their children, the need of children to laugh, the universal craving for variety and excitement, the secret childish success-dreams and romances, vanity about personal appearance, the need to be admired, to be distinguished from one's fellows, to have some individual consequence, to do something well, however trivial or grotesque it may be. The educationists and reformers have something to learn from the hard-headed gentlemen who know how to read the common mind and appeal to it crudely and directly for their own profit. Let us supplement more orthodox methods by turning some commercial tricks to better advantage. Vanity can, for instance, be played on for good as well as for ill, and built up into a wholesome pride.

This book contains recommendations which may be divided into three classes: those which are immediately practicable under existing powers and legislation, many by the exercise of permissive powers vested in local authorities; those which require the enactment of fresh legislation or the amendment of existing statutes; and those which belong to a long-term policy requiring co-operative action by various agencies over a term of years. Numerous as they are, they are yet insufficient to cover the ground, for many of the problems raised need further research. It is the authors' hope that their effort to synthesize some difficult aspects of town life may prove stimulating to further effort and encourage the extension of social surveys upon fresh lines.

They ask indulgence for certain shortcomings due to limitations

INTRODUCTION

of time and space. Their work may appear over-critical to some owing to its inability to acknowledge good work done ; it has, for example, been impossible to notice the generous efforts made by hostesses and voluntary workers, and later by the Ministry of Health, on behalf of the evacuees after their arrival ; to survey the positive side of the work of the School Medical Service ¹ and the social revolution effected by the devoted efforts of early generations of elementary school teachers ; or the wide variety of personal service undertaken by the religious and voluntary organisations to reduce the problems of their neighbourhoods. They are also conscious of the dogmatic form of some of their recommendations ; many of these affect subjects calling, no doubt, for further research, but the authors have judged best in this small book to crystallise their thoughts and recommend on the evidence available to them.

They have been impressed by the wealth of knowledge of intimate conditions possessed by some of the persons consulted and the limited extent to which it has found its way into print. The allocation of funds to permit experienced field workers, including civil and local government servants, sometimes to lift their heads and tell the community what they have seen of the life of the people would help to make this knowledge available. On the other hand, the need for the better sociological training of doctors, teachers, clergy and certain government servants at the outset of their careers is evident. It is, moreover, felt that the administrators of the social service departments fail to get into direct touch with the people whose lives are affected by their work. With their unique facilities for gathering social data on a national scale, they should employ investigators whose reports should, so far as possible, be published, or at least made available to students.

Thanks are due to Dr. Witts, Nuffield Professor of Clinical Medicine ; Dr. Kenneth Mellanby, Sorby Research Institute ; Dr. Alison Glover, late Senior Medical Officer for Schools of the Board of Education ; and Dr. Gill, Medical Director of the Guardianship Society, Brighton, for the communication of original work and views. Dr. Glover has kindly assisted with the interpretation of School Medical Officers' reports and other matters relating to the health of the school child.

The help and courtesy of the Board of Education and the Ministries of Health and of Labour and National Service, especially in furnishing access to information, are gratefully acknowledged.

¹ Appendix XI, which deals with the medical inspection of school children at Aylesham, Kent, illustrates both the strength and the weakness of the service.

CHAPTER I

EVACUATION : THE WINDOW THROUGH WHICH TOWN LIFE WAS SEEN

THE Anderson Committee, reporting in July, 1938, made the important recommendation that evacuation should be voluntary but that powers should be given to compel local authorities to receive evacuees and to oblige householders to take them in. The report envisaged that evacuees would be accommodated mainly by billeting in private houses ; it emphasised the need to safeguard against overcrowding and mentioned the importance of adjusting the social and other services of the reception areas to meet the needs of their augmented population. The suggested powers were given by the Civil Defence Act, 1939.

The whole of the London County Council's area was declared evacuable, but most of the county boroughs concerned were divided into evacuable and neutral zones.

The first and main exodus took place on September 1-3, 1939, about the end of the normal elementary school holiday, when some of the children had been running wild for a month. Most of the evacuees were bundled off with scant preparation and without medical examination ; they arrived in the reception areas in what might be called a state of nature, just as they had chosen to present themselves for the journey. There is no place here to examine how the voluntary nature of evacuation acted in selecting the sample of town population which went forth from their homes. It must, however, have included many from the poorest and most congested areas near river and dockside, railway yards and gasworks, where the threat of bombing was so obvious that their denizens fled, as it seemed, for dear life. As a result, not only the countryside but the nation at large saw the people of the towns, including their lowest, as never before, and the effect was such that we were tempted to accept a suggestion to call this work " No Magic Casements." For once the mountain had come to Mahomet, and its aspect gave little satisfaction.

In January, 1940, the Ministry of Health stated that some 735,000 unaccompanied school children and 166,300 mothers with 260,300

young children had been evacuated on September 1-3, as well as some 12,000 expectant mothers, 5,000 blind and cripples, and 71,000 others, including helpers, physical and mental defectives in schools, and hospital patients, making a total of roughly $1\frac{1}{4}$ million as against some $3\frac{1}{2}$ million considered eligible.¹

There were various later waves of evacuation, but this book concerns itself only with the first great migration, the one from which the scandal arose.

The enduring part of the original scheme and that most susceptible of study is the unaccompanied school children, for whom 347,000 billeting allowances were being paid in March, 1940. Children from secondary schools were foremost in taking advantage of the scheme and staying in the reception areas. Next came those from selective central schools. Children from elementary schools showed the poorest response and the greatest tendency to return to their homes.

After three months, by January 8, 1940, 88 per cent. of the mothers had returned, taking with them 86 per cent. of their young children; but 57 per cent. of the unaccompanied school children still remained in the reception areas.

Considering the evacuation towns in groups, the biggest numbers of school children came from London (241,000), Manchester and Salford (84,343), Merseyside (79,930), Tyneside and Sunderland (52,494), Birmingham and West Midlands (32,688), Leeds and Bradford (26,419), Portsmouth and Southampton (23,145), Sheffield and East Midlands (13,871), and Tees-side (8,052). The chief reception areas were Lancashire (71,484 evacuees), Sussex (67,541), Yorkshire (50,593), Kent (38,000), Cheshire (38,000), Essex (25,000), Northants (24,000), Hertfordshire (23,500), Suffolk (23,000), Somerset (21,000), and Surrey (20,000).

The zoning referred to above had important effects. In Liverpool, for example, the notoriously poor dockside area was zoned as dangerous and other better-class areas as neutral, and this was typical. The poorest areas are the most congested, and the families in them are apt to be large because the people with least money have most children, and, by a vicious circle, the need to feed and clothe a number of children makes it more than ever difficult for them to pay much rent. Zoning, therefore, tended to make the children evacuated from most of the county boroughs contain an abnormally high proportion from the poorest families.

¹ For an account of evacuation see the Ministry of Health's Report for the years 1939-41. Also the Fabian Society's *Evacuation Survey*, by R. Padley and Margaret Cole (Routledge), 1940.

People in the reception areas approached the invasion of their dwellings by evacuees with, on the whole, a praiseworthy measure of goodwill. Nevertheless, hardly had billeting been completed when complaints arose from all quarters in a volume amounting to outcry. Against some of the mothers of young children, they were extraordinarily intense and bitter ; it was said that they were dirty, verminous, idle and extravagant ; that they could not hold a needle and did not know the rudiments of cooking and housecraft, and that they had no control over their young children, who were untrained and animal in their habits. Some of these women were said to be foul-mouthed, bullying and abusive, given to drinking and frequenting public houses, insanitary in their habits and loose in their morals.

These accusations were levelled against groups of women from each and all of the evacuation areas. So obvious were their personal shortcomings that compulsory billeting powers had to be widely used in order to secure their accommodation in private dwellings, and in almost every reception area there were householders who said, after a first experience, that they would defy the law rather than take such persons into their homes again. Stories of the grossest nature were heard by all of us from sources which we could not but accept as reliable. Reports received by the Ministry of Health in the early days of evacuation from many responsible persons show that, making full allowance for any natural tendency in the reception areas to exaggerate the horrors which occurred, it is warrantable to say that some of these women were degraded. The view that they were a disgrace to our national life and to our educational and medical systems was freely expressed. A leading article in the press said the nation had made the mistake of thinking that the decline of infantile mortality was due to our girls having learnt cleanliness in the elementary schools ; that we now realised this to be fallacious, many of them having learnt neither cleanliness nor decency ; that the improvement in infant mortality was due to other causes, such as better ventilation, clothing and nutrition ; that improved health did not, in fact, necessarily mean enhanced cleanliness, and that the problem of teaching the principles of decent living to the future mothers of the race remained to be solved. This article, while perhaps not authoritative on the subject of infantile mortality, spoke for a public opinion profoundly disturbed and revolted.

Against some of the unaccompanied school children the complaints were also serious. Much was forgiven them as not their fault, and

the sight of them filled many hostesses merely with a burning zeal to improve their condition. Allegations were nevertheless widespread that they were dirty and verminous, guilty of enuresis and soiling both by day and night, ill-clad and ill-shod, that some had never had a change of underwear or any night clothes and had been used to sleep on the floor, that many suffered from scabies, impetigo and other skin diseases, that they would not eat wholesome food but clamoured for fish and chips, sweets and biscuits, that they would not go to bed at reasonable hours, and, finally, that some of them were destructive and defiant, foul-mouthed, liars and pilferers. These complaints were generally recognised as reflecting upon the children's parents rather than themselves, and other allegations did so even more directly; some parents were said to have deliberately sent their children away ill-clad in order to get free clothing; to send them pocket money, sweets and "comics" instead of necessary clothing, and to descend, often accompanied by relatives, for week-end visits which were an imposition and a scourge, expecting their whole party to receive free hospitality. The country rang with these accusations.¹

So sweeping were the statements that it almost seemed as if they related to the whole of the evacuees and a stainless countryside had been called upon to bear with a universally degraded town population. It must be emphasised that this was far from being the case. A delightful and moving account of her home life given by a working woman, reproduced from *The New Survey of London Life and Labour*, in Appendix II, affords a glimpse on which we would gladly dwell, of the lights in the picture whose darker side is painted in this book. Persons experienced in visiting the long unemployed (not an unduly favourable sample of the working-class population) say that some 75 to 80 per cent. are decent folk, who have never taken charity in their lives, and who cling to self-respect and cleanliness, often in the most heartbreakingly difficult circumstances; another section consists of families where the housewife has become discouraged in the struggle with poverty and perhaps bad housing, but can still respond to help and encouragement; the remainder are of really low social standard, but the children of these families are relatively numerous.

As regards the unaccompanied children, the number stigmatised as ill-trained was much increased by the nervous enuresis (particularly nocturnal) and soiling produced in some children by excitement and strain and often mistaken for dirty habits by persons ignorant

¹ See Hansard, September 14, 1939, cols. 821-2.

of child psychology. There are no exact statistics as to the number of children showing various faults and physical defects, but the evidence suggests that those with insanitary habits due to lack of training represented from five to ten per cent. Dr. Kenneth Mellanby suggests that as many as fifty per cent. may have been verminous, and the proportion was certainly large.¹ Many of the worst and poorest were among the first to go home. Professor Simey² reports an enquiry made into 655 evacuated Liverpool children which showed that over one-half of the dirty or dirty and verminous children returned at an early date, as compared with one-third of the clean ones. Some parents withdrew their children at the breath of criticism, others because they missed them or had grievances against their hostesses; or wanted their services; very few, it seems, because the children themselves wanted to go home. Professor Simey remarks:

"Evacuation revealed another unpleasant fact: many parents of elementary school children care very little for education and only a few parents left their children in reception areas because they would miss school otherwise. The parents of secondary school children felt quite differently."

Among the children allowed to remain, some few proved to be unwanted, parents either ignoring them or professing to feel no further responsibility for them. After some months of evacuation, 14 out of a group of 127 children billeted at a distance from their homes involving a return fare of 1s. 11d. to 2s. 6d., had not been visited at all. In the course of time, various reports and letters in the press showed that "good riddance" cases had emerged in small numbers.

Most of the outcry against the evacuees related only to a small percentage of the people of the towns from which they came—to their "submerged tenth," in fact. But even a small percentage of the population of the big towns represents a large number of persons, whose shortcomings and handicaps present a problem of the utmost importance. The tendency sometimes manifested in public life to stigmatise any reference to the more sordid aspects of social

¹ A careful record kept at one clinic shows that in a party of 320 London children from Paddington and St. Marylebone, two out of three had head lice on arrival, and nits as well as lice were found in the generality of cases, so that the infestation did not appear to have occurred on the journey. One family consisting of a mother and young children had body lice. At the present time, after nearly three years' evacuation, the children here who pay visits to their homes are so frequently re-infested that their heads are cleansed afresh after every visit as a matter of routine, a proceeding which they much dislike.

² *Our War-time Guests* (Hodder and Stoughton), 1940.

conditions as grossly traducing the working-class is an unhealthy and obstructive one, while, incidentally, by no means all the children complained of came from the homes of the poorest. The scandals have, moreover, now proclaimed themselves beyond the possibility of denial, and to treat them otherwise than with frankness would be a confession both of ignorance and of weakness in the public cause. The authors of this book therefore propose in no way to extenuate the evidence obtained, hoping that it will contribute in the end to lift the reproach from those of our people in whose shame we have all been humiliated.

In justice to the townspeople, it ought to be said that the complaints were by no means all on one side, and that in some instances the shortcomings of the billets and billetors themselves produced the faults of conduct, especially in children, which were the source of complaint. Not all the billets were clean and wholesome, and many hostesses failed in common kindness and hospitality towards families on whom no slur could be cast.

Rural life has advantages of great price: clean air and sleep-giving quiet, ready access to a diet balanced by fruit and vegetables, few temptations to extravagance, and an abundance of pleasures for children which are not bought with money, absence of large-scale congestion (although individual families may be overcrowded), juxtaposition of the social classes, the force of public opinion in small communities,¹ the influence of tradition and the extraordinary interest, discipline and emotional enrichment of tending growing things which brings an element of personal responsibility and creativeness into the humblest lives. The life of the countryman is nearer to that of the long ages which have fashioned man's subconscious self and is more deeply satisfying to instinct. So many aids and incentives to self-respect are lacking in the mean streets of a great city and in the mass-handling to which their denizens are subjected, that a resultant weakening in personal discipline can cause little surprise.

Such *a priori* arguments are borne out by all the available statistics relating to dirt, disease and delinquency, including those twin indices of "decent living": verminous infestation and skin diseases. These can (except for the always disquieting figures of recruits rejected for the Fighting Forces and Dr. Kenneth Mellanby's enquiry mentioned later in this report) be obtained only in respect of school children. For that reason this survey has necessarily based itself mainly upon information as to the health and cleanliness

¹ Charles Booth remarked that the town had drawn from the country the cream and dregs of its population, including those anxious to escape this very force.

EVACUATION

7

of children in schools and accepted it as indicating that of the population from which they come. The reports of School Medical Officers for 1938 show the following striking contrast between the condition of children in specimen evacuation and reception areas before the war :

SPECIMEN EVACUATION AREAS.

Local Education Authority.	Elementary School Children found Dirty and/or Verminous ¹ by School Nurses.	
	Percentage.	Number.
London County Council	16·4	65,292
Liverpool County Borough	20·8	24,130
Middlesbrough County Borough	19·8	3,961
Manchester " "	17·3	11,502
Hull " "	16·1	6,638
Portsmouth " "	14·0	3,784
Birmingham " "	11·2	13,375
Southampton " "	8·8	1,861

SPECIMEN RECEPTION AREAS.

Local Education Authority.	Elementary School Children found Dirty and/or Verminous ¹ by School Nurses.	
	Percentage.	Number.
Lancashire County Council	11·1	11,196
Northants " "	6·3	1,288
Cheshire " "	5·2	2,659
W. Sussex " "	5·0	959
Essex " "	4·9	4,510
Herts. " "	4·1	1,986
E. Sussex " "	3·8	730
Northampton County Borough	11·4	1,123
Chester " "	6·3	332

Summary figures compiled from "The Health of the School Child," the annual report of the Board of Education's Chief Medical Officer for Schools, show the percentage of children infested as :

L.C.C.	16·4
County Boroughs	12·0
Urban Districts	13·7
Boroughs	8·8
Rural Districts	6·6

Recent research by Dr. Kenneth Mellanby² shows, however, that these figures greatly understate the contrast, since, he suggests,

¹ This formula includes bodily dirtiness and lousiness of head or body.

² "The Incidence of Head Lice in England," by Kenneth Mellanby, B.A., D.Sc., Ph.D., *The Medical Officer*, February 1, 1941.

school nurses in the country, faced with a more manageable task, carry out the difficult job of discovering head lice much more thoroughly than those in the towns. He found the very low ascertainment figures for four rural areas in Southern England correct. The ten large towns, however, proved to have the horrifying average figure of 40 per cent. of their poorer child population infested with head lice, the severest condition being found in children of both sexes under five years of age. Two out of three girls of school age in one city were lousy. In the towns more than one in ten infants under one year old were infested, and some 5 to 13 per cent. of women, especially when young. These women would, of course, infest their children. In the country there was no lousiness in persons under one or over eighteen years of age. Dr. Mellanby's results contrast the extremes and do not deal with the great mixed territory between the largest industrial cities and the rural countryside, but they do show beyond doubt that at any time the great towns are capable of pouring out on to a relatively clean countryside a number of infested children, infants and young mothers which is prodigious.

The figures given in School Medical Officers' reports show that skin diseases are a scourge of the town, and have almost been eradicated in the rural counties. In 1938 the L.C.C. treated 9,000 cases of school children with scabies. Hull treated 953; but Hertfordshire, with approximately the same attendance as Hull, treated 22. Middlesbrough treated 657, as against 32 in West Sussex and none in East Suffolk where school rolls were comparable. Similar contrasts can be shown in respect of impetigo and other skin diseases, and there is reason to believe that the figures for the country districts are reliable. These facts may be taken in conjunction with vital statistics such as the higher general, infantile and child mortality rates of urban areas.

As already remarked, it is the industrial towns and seaports which are most at fault, and some of the smaller of these appear to have conditions as bad as those of the largest cities. The industrialised counties such as Lancashire and Staffordshire, and particularly Durham and Northumberland, show worse figures than the rural ones. Bad health and dirtiness are associated in a high degree with overcrowding, which is a defect of all but the newest industrial centres. The rural countryside is entitled to look askance at the social conditions of the industrial town. The outcry against the evacuees, therefore, represented no mere ill-will or hostility to strangers; it had a very serious background of facts which must now be examined.

CHAPTER II

LIVING BELOW STANDARD (I)

THIS chapter and the following one present the darker side of town life, the effects of which on some of the evacuees were so plain. The complaints levelled against them are examined in an order which, for reasons explained in the Introduction, is arbitrary.

(a) *Wrong Spending*

Some hostesses of evacuated children remarked on the poor show put up by townspeople on incomes which seemed to them substantial. They found that some children who were poorly clad were nevertheless given copious pocket-money, and people who looked poverty-stricken and said they could not provide necessities for their children nevertheless spent freely on fares to visit them and sometimes on drink when they arrived. Others sent footwear and clothing which the countrywomen regarded as trash and a mere waste of money.

To use money well involves standards of value and strength of mind. The country housewife has inherited thrift, and the rural tradition of good domestic service and the force of public opinion does much to maintain standards of housewifery. In the towns, however, the poor are segregated in great communities, with a background of life in factory and workshop which is often wholly uneducative in the social sense. Temptations to bad spending are many, and to resist them needs character and intelligence.

The majority of the working class have both, and the manner in which they faced the hard days of unemployment was heroic, pleasure being austere sacrificed. There were parents who, with the bread-winner long unemployed, had up to the late nineteen-thirties never seen a "talkie"; mothers whose underclothing had almost ceased to exist and who could not remember buying themselves any clothing since marriage, but whose homes and children were scrupulously kept. The romanticised pride of the reduced gentlewoman is fully matched by that of these sterling people who spend their household income with amazing principle and sense of values. (See Appendix II for example.) Others, less heroic, live a bit more easily and with a less rigid "respectability"; there is some expenditure on non-essentials, but although

clothing may be poor and food sometimes short, there is real effort to avoid indebtedness and often astonishing generosity to others. Below this come the families whose economy is built on "tick" and who have little idea of facing the hard discipline of "managing."

Some of the most prevalent forms of wasteful spending are :

1. Over-insurance for burial, and insurance of relatives.
2. Extravagant hire-purchase arrangements, often on grossly disadvantageous terms.
3. Use of the inferior type of clothing-club.
4. Excessive spending on drink and tobacco.
5. Recourse to moneylenders.
6. Betting and football pools.
7. Pawning and "tick".
8. Expenditure on patent medicines and certain much advertised proprietary foods.
9. Sweets, "comics", and pocket-money for children.

They are examined here not because any class of society is free from extravagance and unwise spending, but merely because when those who have little mis-spend, the welfare of their families suffers immediately and seriously—they have no margin for follies ; because their vast numbers make them a prey to discreditable commercial exploitation which it must be the aim of every society to curb and control ; because their weaknesses sometimes arise from and are fostered by features in the social order which could and should be changed ; and finally because great sums of money are, in the aggregate, spent by people with small individual incomes, so that their spending is important in the national economy.

Researchers into working-class dietary have recognised that the ordinary housewife spends her money as well as it can be spent to keep her family housed, warmed and free from hunger. Below a certain level in the population, however—and it may be that the line of demarcation is often that dividing the regular from the casual workers—there is exploitation, ignorance and waste, while at all levels housewives could be assisted to make their money go further.

BURIAL ASSURANCE

In Britain working-class families paid, before the war, some £70,000,000 annually for so-called "Industrial Assurance", mainly

burial policies. Of this not less than £23,000,000, or 35 per cent., was taken for management expenses, mostly commission to collecting agents. The Committee on Industrial Assurance in 1933 reported that the Companies, excluding two very large ones, had a combined expenses ratio of 39 per cent., only recently reduced from 43 per cent., and that the figures for individual companies (excluding four, which were inordinately high) ranged from 36 to 43 per cent. By contrast, the cost of administration of Unemployment Insurance by the Civil Service is well under 10 per cent.

We have been shown by one of our members an industrial policy taken out on a life in infancy. The sum assured was £6. Contributions at 1d. a week were paid until the sum assured had been more than completely covered. A paid-up policy for some £3 was then granted and will be payable at some future date, though the contract is already fifty years old. There are millions of such extravagant transactions at the expense of the poorest class; still worse, every year the companies pocket millions of pounds paid on policies which have to be lapsed through the holders' inability to continue payments. Housewives of the poorest class are pestered by agents working on commission to take up policies which they cannot afford, on pain of having to risk a "pauper funeral" for those they love, and every year thousands of these policies lapse and the women are pestered into taking out fresh "free policies" on apparently the same terms, but actually with a diminished return. Every enquiry into the subject exposes the scandals of the employment of agents on a commission basis, who hold their jobs at the price of getting a continuous flow of new business; every such enquiry reports the egregious costs of administration of some of these industrial assurance companies.¹ Yet the National Health Insurance scheme is administered through these companies, thus enabling their agents to get a foot inside almost every working-class door. This arrangement should be brought to an end and administration vested in the Civil Service without delay.

To provide for the disposal of the dead is, from every point of view, the obvious duty of the community, and ought to be covered by any State insurance scheme. Insurance is not a good form of saving and the field of the commercial insurance company should be amongst people who want to do more than assure mere burial expenses. Others should be assured of decent burial without the stigma of recourse to the Poor Law or the waste of income repre-

¹ See Report of the Committee on Industrial Assurance on the Lives of Children under Ten Years of Age, Cmd. 4376, 1934, and *Planning*, July 27, 1937.

sented by contributions to industrial assurance schemes. An article in *The Times* of June 13, 1942, estimated that a death benefit of £25 per head could be given at perhaps one-fifth of the cost to those who insure for burial expenses under the present system.¹

Insurance canvassing is but one example of the door-to-door salesmanship which is one of the pests of town life and one of the most prolific sources of indebtedness. Recently one of us visiting a small provincial housing estate was told that it was canvassed weekly by about a hundred salesmen and that some of the housewives had commitments of 15s. or 16s. a week to them. It is urged that door-to-door business on anything but a cash basis should be prohibited. It should be illegal for any agent to secure the signing of a contract, either for the purchase of goods or for insurance, otherwise than upon registered premises.

HIRE-PURCHASE AND CLOTHING CLUBS

Hire-purchase and subscription to clothing clubs arise from lack of capital and might be countered by more widespread saving schemes run by the State. If commercial companies can run penny-a-week insurance schemes at a heavy profit, the State can perhaps run door-to-door thrift schemes handling modest contributions also.

The Co-operative movement is invited to consider the possibility of extending its activities to assist the poorer sections of the population. It is also suggested that persons drawing unemployment assistance or supplementary pensions should be allowed to accumulate small capital sums with the Assistance Board and withdraw them with interest in multiples of 10s.

All re-housing should be accompanied by arrangements for the local authority to supply their tenants with really hard-wearing and attractive basic household equipment (linoleum, beds and bedding, etc.) on hire-purchase. The possibility of mass production to first-class and varied designs as in Sweden should be explored.²

GAMBLING AND FOOTBALL POOLS

The gambling instinct is probably ineradicable, but an intelligent society will ensure that the economics of gambling are explained in

¹ See also *Planning* (the P.E.P. broadsheet), July 14, 1942, "Planning for Social Security."

² See *Europe Re-Housed*, by Elizabeth Denby (Allen & Unwin), 1937.

all schools and try to provide better outlets for the natural craving for event, excitement and luck. Meanwhile the profits and publicising of organised gambling should be drastically controlled.

DRINKING HABITS

The question of drinking habits has in the past roused such passion in the human breast and been the subject of such ardent campaigning that it is broached only with hesitation here. Nevertheless the country has complained about the drinking habits of evacuees, and it must be admitted that a good deal of the worst degradation of town life—waste of money, pawning and indebtedness, neglect of children, readiness to inhabit undesirable property for the sake of its low rent, insanitary habits in adults and disregard of the decencies of home life—are still traceable to over-indulgence in alcohol. The troubles of the “problem family” generally include excessive drinking by some of its members, and the worst mother is still generally the drinking woman. Apart from sheer drunkenness, a great deal that is undesirable arises from the loosening of control due to drinking alcohol, sometimes in quite small quantities. The sense of what is fitting may be lost, and acts committed which sober reason would condemn.

*The New Survey of London Life and Labour*¹ observes that the subject of drinking is “beset with partisans and starved of statistics” and that no light is thrown upon it by asking working-class families for their budgets. Information obtained in this manner is consistently falsified by the selection of “reliable” and painstaking families, and by the frequent intentional omission or reduction in their statements of money spent on drink and tobacco. The statistical aspect can be approached only by obtaining particulars of consumption, and their nature is remarkable. *The New Survey* states :

“When the figures of national drink consumption and their history in London are examined, the two most striking and immediate facts are, first, the immense present-day volume of drinking, and second, the steady and practically annual decrease that has been going on in the volume of drinking over a period of years.”

It appears that the yearly consumption of beer per head of population in London fell from 46 standard gallons in 1891 to 23 in 1928, Meanwhile the alcoholic strength of London-brewed beer fell and cost soared ; consumption in bulk gallons declined by about two-

¹ *The New Survey of London Life and Labour* (P. S. King), 1935, vol. ix, pp. 243 seq.

fifths, so that for every 10 glasses of beer drunk in 1891 only 6 glasses of lighter beer were drunk in 1928, but at a total cost of about half as much again. Although, therefore, drinking has declined, the amount of money spent on drink by the average Londoner has increased substantially. *The New Survey* states :

" From observation and the available figures it is possible to say with some certainty that an average London family (excluding abstainers) with an income of from £3 to £3 15s. a week, spent (husband and wife combined) about 10s. to 12s. a week on drink in 1934."

The New Survey calculates that an average of 15 per cent. of the family income of the whole working class of London (excluding the unemployed) was spent on drink in 1934, irrespective of their individual economic status.

The number of convictions for drunkenness in the Metropolitan Police District fell from 85 per thousand in 1913 to 15 in 1932, "although the law has been steadily more strictly administered". The proportion of men to women convicted in 1934 was about 3 to 1 in London and nearly 6 to 1 in the country generally. Almost all the drinking was done in public-houses, and about 70 per cent. of the publicans' trade was done at the week-end.

Mr. Rowntree¹ shows a similar decline in convictions for drunkenness in the City of York—which were 52·6 per thousand for the period 1900–1909 and 12·3 per thousand for the period 1930–1937. He finds, however, that the yearly drink bill for the whole population is 2s. a week for every man, woman and child. The working-class families which he surveyed in 1899 spent 6s. a week, or 16·6 per cent. of the family income, on drink. The families surveyed in 1935–6 spent 7s. a week, or about 10 per cent. of their average income, on drink. Thus both the London and the York surveys show a decrease in drunkenness but an increase in the actual amount per family spent on drink, the total drink bill representing a formidable drain upon working-class income.

These surveys stress that the public-house is the recognised social centre of the working man. He may sit indefinitely over half a pint of beer, and not be disturbed so long as an unemptied glass or mug is beside him. Some public-houses even give orders that an empty glass shall not be removed so long as the customer remains on the premises, unless he has ordered another drink. We are touching here one of the very old customs of our race which cannot lightly be uprooted ; the manner in which consumption is

¹ *Poverty and Progress*, J. Seebohm Rowntree (Longmans), 1941, p. 473.

maintained in the teeth of stringent taxation is extraordinary. Spirit drinking is a problem apart, but beer or ale is our national drink, and the remarkable statistics quoted show that the effect of taxation is to diminish consumption but also to increase expenditure to a formidable level. Obviously alcoholic liquor represents, either directly or indirectly, something so precious to the working man that he is prepared to pay very dearly, and much beyond his means, rather than do without it.

Two quite separate problems therefore exist: over-indulgence in drink with its patent manifestations and well-known results, and the less obvious one of a widespread over-spending on drink without, in the main, any resultant drunkenness. This duality is insufficiently realised; the decline in drunkenness is so obvious to any observer of the streets, and to any reader of criminal statistics, that it is apt to produce a pleasant conviction that all is well; that taxation, regulation of licensing and hours of sale, and competing attractions combine to make the problem a declining one which can safely be left to settle itself. Drinking was, for example, one of the main causes of industrial absenteeism in the last war, whereas it hardly counts in this one.

When, however, the question is looked at in a positive instead of a comparative manner, there is little ground for complacency in the employed working-class of London spending 3s. in the £1, and that of York 2s. in the £1, of its income on drink, and, if these figures can be accepted, the diversion of so much of the family income away from the necessities of life must, in the poorer households, be very serious for the children. Clothing may be the item most often sacrificed.

There can be no ready-made remedies for excessive indulgence in drink or excessive expenditure upon it. Some of those who have made this subject their own feel, however, that the answer is to recognise the universal human need of, and right to, pleasure, and seek to offer the working class a fuller life with more satisfactions rather than impose punitive and restrictive measures. The cinema and the dance hall are welcome competitors of the public-house; they should be made better competitors, and the pub a better pub.

Perhaps the best deterrent to the formation of drinking habits in young people is to help them to acquire sources of pride—physical fitness, skill in work and games—which they will lose through excessive drinking, and to show them better uses for money.

The "treating" system is probably the chief incentive to excess.

It obtains to some extent amongst women as well as men, and housewives are sometimes known to say that "the others don't like you unless you go in and stand treat." The "No Treating" Order of 1915 is said, however, to have proved largely ineffective.

The right line is perhaps to restore and maintain the natural partnership of food and drink. On the one hand, establishments now sell large quantities of alcoholic liquor without providing any food except a few biscuits; on the other, certain voluntary bodies run hostels for sailors, clubs, canteens and the like without a licence, so that the men cannot have their drink with food and are driven to the public-house for it. Alcoholic drink is one of the physical pleasures that can be bought and that are in every sense within the reach of the weekly wage-earner. It is purveyed to him at every corner, he can pay for it, at least in small quantities, and it is the vehicle for easy social intercourse. A study of sanitary history suggests, moreover, that London survives as a centre of population because its people have in the past drunk beer, instead of the highly dangerous and often sewage-tainted water intermittently supplied and stored in butts! A water supply that is safe to drink is, indeed, a recent innovation, dating probably from the London Water Act of 1902, which put an end to the supply of water by private companies. Beer has won its place as a safe, as well as a pleasant, drink in the past. Why not combat excessive drinking by setting up the pleasures of eating as a counter-attraction?

This revolutionary thought has not been left for the authors to discover. It has long been accepted by the highly successful Public-House Trust Companies. The Restaurant Public-Houses Association has worked for some years to forward the principle of "fewer and better pubs". Miss Edith Neville, the founder of the Association and an ex-member of the Licensing Commission, wrote as follows:

"The majority of men in the public bar have one or two glasses of beer, the typical English drink (with its approximately 5 per cent. of absolute alcohol, by volume, as compared with the approximately 14 per cent. of wine and the approximately 40 per cent. of spirits), at the best time of all for drinking from the health point of view—with or after their chief meal. All they need is cleanliness and comfort, good drink and good food.

"Unfortunately, they do not always get all these things, particularly in the poorest neighbourhoods. There is special need for the simple well-cooked food now frequently obtainable, in London at least, in the more well-to-do districts. For people living alone, out at work all day and too tired in the evening to light the fire and cook a hot meal in their

lonely rooms, such meals are the greatest boon. And they are a boon to many others as well—for instance, to the mother too tired on washing day to cook a proper meal for her husband and herself, or needing the rest and change from the care of the family which is ensured by supper out with her husband once or twice a week. Or she may merely want the relief of knowing that her husband can get a good meal outside if she has been unable to prepare one for him. Again, on the day when a child has to be taken to hospital, or other lengthy business has to be done, the children can fetch a hot meal from the off-sales department where no drink is sold. That is the alternative to being left with bread and jam to eat in the streets. Much regular custom of this sort is given to public-houses where meals are supplied.

“Finally, there is the unfortunate person who through poverty or bad cooking or bad management never has a good meal and has begun to drink too much, to drown the physical discomfort of underfeeding. To such people, the well-cooked meal, the sausages sizzling before them, the savoury pies and puddings are irresistible. The desire for food by the hungry is apparently stronger than any craving for drink. Undoubtedly it is when the food is temptingly displayed. Thus the excessive drinker (deplored alike by brewer, licensee and neighbour) becomes a better nourished and more satisfactory citizen.”

The Association's work evidently does much to realise suggestions made in the section on Feeding Habits, as well as diverting expenditure on drink into more profitable channels. Parents who learn to feed themselves better will also feed their children better, and every child who learns what it is to eat well does good to itself and the community and is fortified against over-drinking. The English are a reasonably sober people, and alcoholic excess could be reduced to very small proportions indeed and much money put to better use if a good meal and a good drink—tea, coffee, milk, beer, or what-not—were regarded as the proper and natural form of refreshment, not only in public-houses but in hostels, clubs and community centres. It would be pleasant to see these places, and perhaps the British Restaurants of the future, assume a more robust jollity, and England be the Merry England of good cheer for the common people again.

EXPENDITURE ON TOBACCO

This subject is not generally noticed as important in the budgeting of any class, but experience indicates that it ought to be. Smoking represents expenditure which is entirely non-productive; tobacco has not even the food value of sweets. Many men of the middle class consider it reasonable to smoke fifty cigarettes a day at a cost of 25s. a week,¹ while twenty is a commonplace. Amongst the

¹ This was written before the latest increase in taxation.

working class, an expenditure of half-a-crown a week or more on cigarettes often persists during unemployment, and smoking has come to be regarded as so much a necessity, that letters of complaint about the adequacy of allowances from public funds often rank it with bread, groceries and fares among the basic items of the budget. Since such allowances include nothing for tobacco the money spent on it must be found at the expense of the family's necessities.

Humanity must have its satisfactions, but any measures to counteract heavy smoking, especially at young ages, would be welcome. It does no good to the physique and tends to engender selfish spending. The measures suggested above—the encouragement of pride in physical fitness and the establishment of better facilities for eating—seem most appropriate.

MONEYLENDING

Social workers and others state that recourse to moneylenders is frequent, and illegal moneylending by unregistered persons still prevalent in defiance of the law. One of the authors of this book wrote in 1932 :

“ In almost every poor street there is one house with evidences of startling prosperity—solid and expensive furniture, good clothes, luxurious meals, money for cinemas and days at Southend. Yet the owner of all this wealth does not appear to be gainfully employed. This is a person who has at some time saved or inherited a small sum of money, started a moneylending business and thrived upon it.

“ The Moneylenders Act (1927) provides that all moneylenders must take out a licence, the charge for which is £15 per annum. Interest must not in any circumstances exceed 48 per cent. per annum, and the Court may decide that a transaction is ‘ harsh and unconscionable ’ and that the interest charged in certain cases is excessive although not exceeding 48 per cent. per annum (17 & 18 Geo. 5, s. 10). This is a very high rate, but if allowance is made for bad debts, the business does not seem to promise a fortune. Yet fortunes are made at it, and even where there is much competition and individual businesses are small, moneylenders do well.

“ The secret is that the law is broken. I know of no other law which is broken so often and so openly. *The recognised rate of interest for weekly loans is 1s. 8d. in the £, or 1d. in the shilling—i.e., 433 per cent. per annum.* This rate is paid as a matter of course. It is never questioned.

“ In another way the Moneylenders Act is widely disregarded. Not only do licensed lenders charge illegal rates, but the largest trade is often done by unlicensed lenders. The Act provides that a licence must be granted at Petty Sessions, or, in the Metropolitan Police District, by a police magistrate. The licence must bear the licensee's true name.

Borrowers are protected in various ways, especially in the rigid restrictions placed on moneylending advertisements—which are virtually forbidden. But in practice this wise legislation is of little account. The majority of people who lend money in small weekly sums do not apply for a licence and do not need to advertise. The poorer the district, the better their prospects.

“An influenza epidemic comes ; several wage-earners in the same family are ill all together and the sickness benefit does not come through at once. It seems a simple matter for this family to repay a loan, but illness is expensive, it may last longer than anyone expected, and unemployment may come at any moment.

“This is a typical instance of the way in which debts start—but there are a thousand emergencies when immediate cash is a necessity: money has to be found for a railway journey, for a doctor, for all-night fires in a case of sudden pneumonia: there are periods of waiting for accident compensation awards and National Health Insurance benefit: it is then that a family gets into the moneylender's hands. I will explain what this means by a few actual instances :

1. A man earned £2 13s. 4d. a week. He had a wife and five children—only the youngest of whom was still at school. Of the elder children one son was epileptic and unemployed and two were out of work. One of these boys was not in a position to draw unemployment benefit: the other drew 15s. 3d. A daughter of 14 earned 12s. a week, out of which she had to pay fares and dinner money and buy her clothes. Their rent for a four-roomed flat was 18s. a week. During various periods of illness and misfortune this family had borrowed £22 10s. 0d. from a moneylender. Every Friday £1 17s. 6d. had to be paid in interest only, and every week more money was borrowed.
2. The mother of a large family borrowed £5 from a moneylender when her husband had had a long spell of unemployment. The children were all of school age, but the mother had a little morning work as a cleaner, and the man's wages were about £2 18s. 0d. a week. These people paid £1 regularly every week to the moneylender, who charged them at the rate of 4s. in the £ per week.
3. A man with a small greengrocer's shop had a run of bad luck. He was industrious and careful: he tided over the bad time and rented a better shop, but he could not afford to stock it. He borrowed £9 from an unlicensed moneylender who agreed to charge him 1s. in the £ weekly. He has paid the 9s. every week for years and has never earned enough to repay the principal.

“No licensed moneylender charging in excess of the legal rate and no unlicensed lender could prosecute a client who refused to pay either principal or interest. Yet the moneylender is secure, and for several reasons.

“As a rule the borrowers have a high standard of honour, and are shocked at any suggestion of repudiation. Others will not risk being ‘shown up’, for the lender, being well to do, is often influential and knows how to make life very unpleasant for defaulters. Far more important than either of these reasons, there is the inescapable fact of poverty itself.

There will be other occasions of desperate need. These men and women who thrive on their neighbours' misfortunes are actually held in esteem; they are regarded as friends who are kind enough to oblige the unfortunate.

"I have only touched on the more obvious forms of usury. There are many others.

"While poverty is widespread these evils will continue—but they would be lessened if illegal moneylenders were more often prosecuted. The licensed lender who does an honest trade generally keeps well within the law on a 40 per cent. basis—of 4s. in the £ for six months' loan.

"This type of lender takes principal and interest payments together, by the week or month to suit his clients. It is the 1d.-a-week-on-a-shilling man and woman who must be forced to shut up shop.

"Lastly, there is the question of education. If lectures were given at schools and evening classes, and broadcast talks arranged to explain the law of moneylending (it is very simple), at least the victims might refuse to pay another penny of these illegal charges, and the general warning would force lenders to reduce rates."

A caretaker correspondent who later describes the strange dealings of the clothing clubs has sent us an account of the loan clubs commonly run by publicans or accommodated on their premises to bring in trade. A share is bought for 6d. down and fifty payments of 6d. a week, *i.e.* 25s. 6d. This entitles the holder to borrow £1, and, indeed, if he does not do so he is fined 1s. in the share-out at the end of the year. He pays "quarterage" of 3d. per quarter. Every time he misses a weekly payment he is fined 6d. He generally borrows his £1, repays it, and borrows it again in the year, paying 1s. interest on each transaction. At the share-out he gives 6d. per share as Christmas box to the "organiser", and generally gets back 25s., the nominal value of his share, plus 1s. 8d. to 2s. Thus, supposing him to incur one fine, he pays in 29s. on a single share and gets back about 26s. 4d. The normal holding is of 4 shares, so that each holder may drop some 10s. 8d. a year over his transactions. A club sometimes issues as many as 2,000 shares. A mere 1000 shares bring in an income of about £135 per annum or over £2 10s. per week to the fortunate organiser, who functions on Monday night only and no doubt has many other irons in the fire. The rate of interest, supposing the shareholder to have £1 per share on loan during the whole year, is 13½ per cent., which is moderation itself compared with the moneylenders.

Our informant remarks on the capacity of such transactions as moneylending, trading in clothing checks, loan clubs and the worst type of clothing clubs to "bleed" the purchasing power of a neighbourhood, and adds that unemployment may be a blessing in disguise since it offers a good reason for not paying the weekly

instalments on innumerable debts. There is some evidence of this, and men have been reluctant to return to work because the monetary gain would be swallowed up by the renewal of a swarm of weekly "instalments" suspended during unemployment. It is perhaps not generally realised that indebtedness and usury, the curse of the East, come so near home.

Finally, he draws a sharp contrast between the people who lend themselves to all this bloodsucking and those who resist it. The one become known, he says, as "The Poor", while the others remain, on equivalent incomes, the intelligent and self-respecting working class who are any man's equal.

Schemes, which no doubt exist, to meet the need of poor people for capital sums by honourable means cannot be studied here. The creation of the Assistance Board, which is able to supplement Unemployment benefit, pay allowances during periods of waiting, disallowance, and part-time or intermittent employment, and make special grants to meet exceptional needs during unemployment, ought to do away with many of the emergencies which have led to borrowing from moneylenders in the past, and its powers should be fully known to all workers' clubs and societies as well as to social workers. Every provision which adds to economic security discourages indebtedness.

A plea for mathematical problems in schools to be based on the real transactions of moneylenders, hire-purchase firms, clothing clubs, loan clubs, and industrial assurance is particularly appropriate here. The sums young heads should be bent over are not only remote calculations of interest at 3 per cent., but these painful actualities, which they should be taught to grasp and to condemn as soon as their reasoning faculties and arithmetic are equal to the task.

PAWNING AND "TICK"

Pawning and buying on credit are both forms of borrowing. The former is to some extent local—there are, for example, no pawnshops in the Welsh valleys. It is strictly controlled by law. A fresh study of the pawnbroker's function might be useful and suggestive.

"Tick" is extremely widespread in the poorer quarters, where the general practice is to live on the coming week's wages, which are thus entirely pledged in advance. It is a sure sign of respectability if a family pays cash, living on last Friday's wages rather than next Friday's. Credit trading must inevitably lead to high prices and

give scope for chicanery and abuse. The system is vicious and, with the advance of social security, efforts should be made to discourage it.

PATENT MEDICINES AND PROPRIETARY FOODS

The Patent Medicines Act, 1941, has usefully stopped a hole in the intelligent housewife's purse by requiring compulsory disclosure of the composition of patent medicines. Proprietary foods and beverages should be the subject of similar control. Some are not only worthless, but sold at prices inflated by advertising charges.¹ The possibility of limiting the amount which firms may spend on advertising should be explored.

CHILDREN'S POCKET-MONEY, SWEETS, "COMICS" AND AMUSEMENTS

An enquiry made in Manchester and mentioned in the School Medical Officer's report² showed that school children in the poorer districts had far more pocket-money than those of the better class. Many hostesses made the same observation; they found 1s. to 2s. 6d. a week quite common.

These children spend their money largely on sweets, ice-cream and comics. The general provision of a mid-day meal in schools might wholesomely divert some of the money now spent on sweets, often of the most wretched quality. The composition of such sweets might well receive publicity.

As for comics, they clearly meet a need, but their quality is generally poor to a degree. An effort might be made to place a better substitute upon the market at the same price.

Frequent visits to the cinema are often regarded as a common extravagance of the working class, although it is well to remember that Charles Booth reports the police of his day as deploring the bands of young people who hung about the streets in the evenings with nothing to do, a danger to themselves and to others. The great chains of cinemas have become a powerful vested interest which ought to be carefully watched and controlled. It is hoped that the Board of Education will publish, or at least make available to students, any information bearing on cinema attendance and other leisure-time habits of young people obtained in the calling-up interviews.³

¹ See *Government and Industry*, by S. Courtauld (Macmillan), 1942.

² City of Manchester, School Medical Officer's Report, 1936.

³ See also *Girls Growing Up*, by A. P. Jephcott (Faber), 1942.

RECOMMENDATIONS

1. Burial insurance should be taken out of the hands of commercial companies.
2. National Health Insurance benefits should be administered through the Civil Service and not through Approved Societies.
3. The employment of door-to-door salesmen on a commission basis should be prohibited.
4. Hire-purchase agreements should be legal only when completed at a registered business address.
5. The profits and publicising of organised gambling should be strictly controlled.
6. The sale of appetising food at licensed premises should be encouraged.
7. Lectures on the law of moneylending should be given in educational institutions of all types, and broadcast; arithmetical problems in schools should be framed to bring home to children the real transactions of illegal moneylenders, industrial assurance and the undesirable types of club and hire-purchase firms.
8. A study should be made of the pawnbroker's function in society.
9. Efforts should be made to put more good, cheap children's papers on the market.
10. A study should be made of the social influence of cinemas and dance halls.

(b) Bad Sleeping Habits

The foster parents of evacuated children often observed that they had been accustomed to go to bed at very late and often irregular hours, and that some few had never slept in a bed before. As regards the unsatisfactory type of evacuated mother, it was said that she not only went to bed very late but lay abed until all hours in the morning and sometimes until high noon, regardless of whether there were children to be washed and fed or not. Her expenditure on artificial light was extravagant and she often kept it burning all night in children's rooms.

The educational world has of late years shown a good deal of concern over the question of schoolchildren's sleep, and it has become a commonplace to say that the town child is underslept.

The Board of Education's handbook for schools, *Health Education*, classifies the main effects of insufficient sleep as malnutrition, lassitude and mental fatigue. It recommends that children up to

12 years of age should have 12 hours sleep in bed every night and younger children as much as 14 hours; that they should be encouraged not to eat heavily before retiring and to utilise their astonishing faculty for sleeping through din.

Various investigations of hours of sleep have been made by school medical officers; Dr. Gladys Stableforth of Kent has some interesting observations in a paper (relating, she states, to the urban districts) from which the following is an extract¹:

"Surprising slackness and lack of interest is displayed by parents over the bedtime of their children. This is due either to ignorance of the physiological importance of sleep, in which case it is sometimes corrected after explanation, or to lack of organisation in the home, or else in many cases to parental laziness and inattention, the children being allowed to retire when they choose."

Dr. Stableforth found, for instance, that two out of three children aged from 2-7 years went to bed at 8-8.30 p.m., whereas children up to 4 years should in her view retire at 6 and children up to 6 years not later than 6.30. A high percentage of children up to the age of 14 years had insufficient sleep. She regards the consequence of late bedtimes as:

1. Loss of appetite, particularly for breakfast, and often for dinner, accompanied by nausea.
2. Nervous symptoms: irritability, emotional instability, proneness to tears, restlessness, restless sleep and heaviness in the morning.
3. Fatigue: marked listlessness, inability to concentrate during class or even during play, falling asleep in class.
4. Bad posture: round shoulders, hollow back, etc.

She has some suspicion that slight cardiac enlargement and quickened pulse may be associated with lack of sleep.

Dr. Stableforth states:

"I have been gratified that *some* parents with whom I have discussed the sleep question have told me several months later how much improved in general health their children have been since they began earlier bed-times. This is particularly cheering if these parents visit on a day when there has been an influx of those other parents who cannot get their children to go to bed early, even five-year olds! and probably have no intention of trying."

Dr. Clarke of the Walthamstow School Medical Service reported in 1932 on the "Hours of Sleep of 4,000 School Children" as follows:

¹ Kent County Council, Annual Report of the School Medical Officer for 1934.

"Many cases of debility in school children are largely due to insufficient sleep. The children go to bed at their own time and no proper rest is insisted upon. Parental discipline is slack in these cases and the child is treated as an adult from whom one would expect sense."

Dr. Clarke apparently regarded one in thirteen of her sample as underslept, but the percentage would have been substantially higher had she adopted the standard suggested by the Board of Education, and yet higher, no doubt, had the investigation taken place during the summer months. She concluded that "It is only by persistent supervision and advice that we can secure for the growing child an adequate amount of rest".

In 1937 the L.C.C. published a pamphlet of advice to parents on sleep which was widely noticed and said to have had good results.

An important point which needs to be stressed is that lack of adequate sleep produces *inability* to sleep, which has to be overcome by the establishment of a proper sleeping habit. This may require much time and patience. An enquiry made by one of us in 1942 showed that the evacuated children still in many cases did their best to avoid billets where early bed was the rule, and that it was a continual source of difficulty in the local hostel. The matron told of a small ex-inmate putting his head in at the window at 10 p.m. and ejaculating triumphantly: "I'm still up!"

The loss of memory and of concentration produced by lack of adequate sleep are the mortal foes of education; the bad temper and nervous instability are the enemies of discipline and character-building. The normal child who sleeps sufficiently is interested, retentive, ready to enjoy bodily exercise, to emulate his fellows and co-operate with his teachers. The child who is habitually underslept is dull and wandering, forgetful, slack and timid or bad-tempered. Much public money spent on education must be wasted through failure on the part of parents to ensure that their children have adequate sleep, and the effect in strain and discouragement among teachers must be severe.

The mother who goes to bed at midnight and gets up at noon must often disturb her child's rest and give it scant attention in the morning, and indeed the sight of an unwashed child running late to school with a hunk of bread in its hand is common enough in poor quarters. Dr. Powell of Walthamstow Local Education Authority made in 1933 a study entitled *Children attending School without Breakfast* which is eloquent of the effect upon the welfare of the family of these undisciplined habits. Dr. Powell reports that of 65 school departments, 17 had some children attending

without breakfast. He gives particulars from four departments, presumably those showing the worst returns :

School and Department.	Number attending without Breakfast.	Reason.
1. Blackhorse Road Senior Girls	59/347 = 17 %	42 { (a) felt sick. (b) did not fancy it. (c) no time to eat it. 17 Poverty. Appearance and physique bear this out.
2. Wm. McGuffie Senior Girls	38/352 = 10.8 %	No appetite.
3. Wm. Elliott Whittingham Boys	30/390 = 7.7 %	13 No appetite. 11 Occasionally (<i>sic</i>). 6 Poverty.
4. Markhouse Road Infants ¹	22/224 = 10 %	12 Get up late. 3 No appetite. 7 Poverty.
	149/1313 = 11.3 %	

The children in schools 1, 2 and 4 came mainly from old cottage property and in 3 from Council flats.

These are distressing figures, and no doubt they could be paralleled in many schools in poor quarters. It would be unwise to attach too much importance to the precise reasons given by the children, some of whom may have pleaded lack of appetite as a cloak for poverty. A remark by Dr. Cicely Peake ² leads us to suppose that the child's conduct is often consequent on that of a mother who takes no breakfast herself, either through poverty or lack of time. On the face of it, however, the majority of cases are either due to late rising or to a lack of appetite to which inadequacy of sleep may have been a contributory cause. The evidence of the Roding School experiment ³ as to the influence of a satisfactory breakfast on health and progress in schoolwork lends further importance to the good preparation of children for the day's activity.

There can be no doubt that lack of sleep is one of the main factors militating against the well-being of the town child and that its cost to the nation in lowered vitality, stunted character, susceptibility to ailments, wasted education and impaired industrial efficiency is enormous.

¹ It appears that in all departments of this school 41 children attended without breakfast owing to poverty. 25 of these lived in one area.

² *Public Health*, 1937, p. 25.

³ See Titmuss, *Poverty and Population* (Macmillan), 1938, p. 40.

The conditions of living in the mean streets of large towns may make satisfactory sleep for children difficult. The influence of overcrowding is, of course, obvious, especially when children share a room with adults or with older boys and girls who come in late and disturb them ; in such conditions there is a strong temptation for the younger children to insist on staying up until their elders retire. *Growing up in Shoreditch*¹ throws the following light on the conditions in which children of school age were found to sleep in a poor quarter.

In two groups of about 200 each :

1 in 10 eleven-year-olds and 1 in 5 fifteen-year-olds had their own room.

1 in 4 eleven-year-olds and 1 in 3 fifteen-year-olds had their own bed.

In a group of 315 of mixed ages :

1 in 3 slept 4 or more in a room, 13 children slept 6 or more in a room, and the highest number in a single room was 10.

1 in 10 slept in a room with both parents. 55 children shared a room with 1 or more adults.

The number per bed is not given, but a case of five is mentioned and can be paralleled from the reports of the L.C.C. nutrition centres mentioned above and the experience of field workers.

It emerges that while a minority of the children had favourable sleeping conditions, those of the majority were poor and those of some touched very low levels.

Very serious disturbance of sleep is caused by the irritations of lice, scabies, and skin diseases, and of that other scourge, the bed-bug.² This last is, unhappily, very common in old property, where it lives and breeds in cracks and crevices of both structure and furniture, coming out to feed on human blood at night. It has a peculiar musty smell by which its presence can often be detected on entry into a room or building. Many respectable people keep the bed-bug at bay by the unremitting use of soap, water and scrubbing-brush, or literally flee before it. Eradication is difficult, and careless re-housing has often permitted it to be carried into new property. There is need for the duties of private landlords and local authorities as to disinfection to be more strictly defined and their fulfilment enforced by a national campaign.

¹ *Growing up in Shoreditch*, pub. Shoreditch Housing Association, Toynbee Hall, 1938.

² *The Bed Bug and How to Deal with It*, Ministry of Health Memo. 180 Med., 1936.

In addition to the difficulties of overcrowding, many mothers must fight for their children's sleep against late and noisy street-life. Gangs of boys and older girls hang about, laughing and calling, the lamps are lit, the cinemas and dance halls open, the wireless blaring, and it may be difficult even for the conscientious mother to get her child to sleep where there is no quiet and other children are running the streets : one such says eloquently that she always " sends them to bed with a clout ". Careless parents, on the contrary, resort to the easy excuse that it is useless to put children to bed by daylight, and many leave them to run the streets even after dark and may be heard calling them in as late as 10 or 10.30. This is often the subject of remark by residents on housing estates where the class of tenant is mixed.

The problem needs to be tackled courageously and on broad lines. Sleep is a habit, and the nation which values its children's health and intelligence cannot afford to let sleep training, any more than sanitary training, be neglected in the child's early years. One of the greatest advantages of nursery schools over ordinary infants' schools is the fact that sleep forms a regular part of their curriculum. Other suggestions are therefore prefaced by the strongest possible recommendations for the immediate extension of nursery schools to cover all the poorer districts.

RECOMMENDATIONS

1. The Ministry of Health should ask the Anti-Noise League to make a special enquiry into the regulation of street noises, including those emanating from premises, at night, and the possibility of restricting heavy night traffic to prescribed routes.

2. Still further stress should be laid upon the need for hygiene teaching in schools to include advice about hours and conditions of sleep.

3. School Medical Officers, teachers, school nurses and Health Visitors should make a special point of advising parents on this subject.

4. The Central Council for Health Education should be invited to conduct a national " Sleep Campaign," with appropriate posters specially displayed in the mean streets and in blocks of working-class flats.

5. The question of hours and conditions of sleep should be given prominence in all Health Talks at Maternity and Child Welfare Centres, " Health Weeks " and exhibitions.

(c) Bad Feeding Habits

Foster parents complained extensively of the bad feeding habits of their charges. They said that some of the children had been unused to sit down to a meal or to use cutlery ; they were accustomed to have a " piece " in the hand, always of white bread and generally spread with margarine and cheap jam, and to eat it on the doorstep or in the street, or else to buy fish and chips which they ate from the newspaper wrapping. Others were said to clamour for fish and chips, pickles, ice-cream, biscuits and sweets and to have been used to drinking strong tea or even beer ; to have been quite unaccustomed to eat vegetables (especially green), soup, puddings or salad. Some children said they had never seen their mothers cook and that they had no hot meals at home.

Some of the mothers who combined substantial incomes with a low social standard showed a wastefulness with food which horrified the countryside. A few disclosed that their custom was to serve the family with a hot joint and throw away or bury the remains, while many had no idea of reheating cold food such as potatoes and simply throw it away. Some encouraged their children to stuff themselves or allowed them to leave food uneaten and throw it about.

No doubt a great deal of the bad feeding complained of was due to parents' inability to afford a balanced diet. But bad dieting appeared by no means entirely as a problem of poverty. Some parents who had fed their children abominably were obviously well-to-do and gave them copious pocket-money. Some showed a strange conviction that what a child clamours for is what it needs, an attitude illustrated by a grotesque but authentic episode of a child of eight who, in billet and sick-bay, would eat no food whatever except chocolate and sweet biscuits. Her parents, who fetched her away in a smart car, said that they and their son liked beef and greens, so that was good for them, and Barbara liked sweet things, so they were what she needed. Barbara, whose will appeared never to have been crossed, succumbed to diphtheria within 36 hours. Her case is extreme but not by any means isolated in the experience of field-workers. Some children seemed simply to have ridden roughshod over their parents, and their background is superbly illustrated by a story from Miss Cecil Leslie ¹ :

" My sister, a house property manager, was asked by a tenant to forbid a vendor of toffee apples visiting the square before dinner. My sister said she had no power to make such a prohibition and wanted to know why

¹ Red Cross Commandant in charge of Highfield Sick Bay, West Byfleet, Surrey.

it should be asked for. The tenant explained that her son was very frail, and at the clinic they had told her she must give him a careful diet, and obedient to their instructions she was buying fresh food for his dinner and cooking each day, but he had no appetite for it and refused it after eating a toffee apple.

"My sister asked why it was necessary to give him one, and was told he would 'take on terrible' if refused, so then my sister suggested buying a toffee apple and giving it as dessert and a reward for eating his first course well, but the mother said that would be *quite impossible*—the only way to prevent her son having a toffee apple before dinner was to prevent the merchant calling before dinner."

How often, alas ! has the social worker seen that mother with her boys, and shuddered to see in them the husbands and fathers of the next generation !

Hostesses tended to attribute all the oddities in the children's dietetic habits to poverty or maternal laziness, ignorance and neglect ; the more thoughtful soon realised, however, that the causes were complex and ramified into all the conditions of city life. One hostess received two children whose father worked as a decorator, their mother as a restaurant cook, and their elder sister as a factory hand. A regular and substantial income came into the house. The children were very poorly clothed. They never ate vegetables at home during the week ; they breakfasted on bread and butter and tea, got themselves fish and chips at midday, when their mother was out, and had a third meal of bread with meat paste, cake and tea, generally prepared by their sister, which was the last in the day. Their mother served a cooked dinner on Sundays. The elder sister remarked that most of the money went to the pub, and no doubt the story evidenced bad household management and poor social standard. The parents, nevertheless, seemed ready enough to produce clothing when their pride was touched, and, properly tackled, would probably have paid for their children to have a midday meal at school had this been available. For those in authority to refrain from providing such a meal because the mother "ought" to do so may result merely in the malnutrition of the child.

In 1933 the section of "The Health of the School Child" dealing with nutrition stepped from the back to the front pages of that Report, where it has since held a place of honour, reflecting the awakening of national interest and concern in this subject. A great deal has been done of recent years to measure the nutritional state of children and examine into the causes and cure of malnutrition.

The practice of judging the adequacy of a child's height and weight by an average standard has been discredited. Anthro-
po-

metric standards represented the average of large numbers of children in whom those of the labouring class necessarily predominated. These averages were found much too low for the children of the middle class considered separately and were continually outgrown even by the others as social conditions improved. They are now used only for comparative purposes. Their fate is a warning against accepting standards based upon less than the best stratum of the population.

The method of assessing nutritional state prescribed by the Board of Education is an estimation of the child's general condition—"The state of the skin, the lustre of the hair, the appearance of the eyes, the colour of the mucous membranes and the alertness and attitude of the child." In order to be classed as of "Excellent" nutrition a child must, in fact, look a shiningly healthy young animal.

It is not proposed to quote statistics on this subject from "The Health of the School Child" or School Medical Officers' reports. The assessment is subjective, and tests have shown that doctors from a poverty-stricken place have a lower standard than those from a prosperous one.¹ A comparison of assessments often shows results incompatible with the relative economic condition and vital statistics of the communities concerned. The school medical service's nutrition statistics are, as a whole, at variance with inferences as to early nutrition based upon an analysis of family income as carried out by Sir John Orr,² who estimates that one child in four cannot, from its parents' income, be adequately fed. The effects of nutrition are long-range and extremely difficult to measure. Elaborate assessment by the school medical service may have done harm rather than good by representing some nine out of ten of the school population as normally or excellently nourished. Three out of four of these are classified as "normal" and many of these children might have been considered sub-normal had they lived in a more prosperous place, or even attended a different school. It is suggested that all school doctors should form their standards by observing the children of the well-to-do and should be supplied with the fullest particulars, including photographs, of the condition of such children to act as a continuing standard.

Even so, the national figure for "Excellent" nutrition amongst elementary school children was less than 15 per hundred in 1938. A careful and standardised investigation in Birmingham,³ however,

¹ See Titmuss, *Poverty and Population*, pp. 94 *seq.* See also Professor Cathcart's speech to the British Medical Association's Nutrition Conference in *Nutrition and Public Health*, pub. B.M.A., 1939.

² Sir John Boyd Orr, *Food, Health and Income* (Macmillan), 1936.

³ City of Birmingham, Report of the School Medical Officer, 1938.

summarised in Appendix III, accepted only 2·5 per cent. of the children examined as excellently nourished—a disturbing thought.

THE CAUSES OF MALNUTRITION

The interesting research carried out by the school medical service is difficult to summarise, since at this pioneer stage the various writers present their material differently and without reference to any standard work or terminology. The following information is gleaned mainly from the L.C.C. school medical reports of 1937-38 and the report of the special enquiry made in Birmingham in 1938 referred to above.

There is general agreement that malnutrition may arise from three causes : (1) lack of food ; (2) bad choice and preparation of food ; (3) inability of the body to assimilate it.

The Birmingham enquiry classified the causes of malnutrition in 3,154 children as follows :

		Bad Nutrition.	Slightly sub- normal Nutrition.	Total.
		%	%	
These categories overlap extensively	Financial [(1) as above] .	280 = 63·2	711 = 26·3	991
	Pathological [(3) as above] .	93 = 21·1	1,128 = 41·6	1,221
	Dietetic [(2) as above] .	48 = 10·9	351 = 12·9	399
	Social [(3) as above] .	21 = 4·8	522 = 19·2	543
		442 = 100	2,712 = 100	3,154

The investigation confirmed the School Medical Officer's belief in open-air schools as a cure for malnutrition. Almost three-quarters of the children in the "Poverty" group were receiving school meals, but it was seen that the Education Authority's index of need excluded many borderline cases and some where the parent was in intermittent employment. The provision of meals for payment was advised in order to meet these cases and others in which both parents went out to work.

From the L.C.C. Nutrition Centres come reports which relate to much smaller groups of children. In the main they bear out Birmingham's diagnosis but with a greater emphasis upon psychological factors, which are considered to account for a high percentage of cases from the more prosperous districts. It is difficult to bring

the children of the well-to-do under treatment owing to the parents' reluctance to believe that anything is wrong with their child. Parents' co-operation is by no means always forthcoming, and even such attractive cures as country convalescence may be refused. It is recorded that a child was discharged owing to its parents' refusal to be associated with any of the measures suggested.

To examine the causes in order :

Lack of Food is generally due to poverty, and the Birmingham figures suggest it as the most potent cause of really bad nutrition. Dr. E. Gourlay¹ found the family income, less rent and insurance, of 95 new cases entering two L.C.C. Nutrition Centres in 1938 as :

Under 5s. a Head.	Over 5s. and under 10s.	Over 10s. and under 15s.	15s. and over.	Total.
39	20	31	5	95

31 were the children of unemployed men, and 12 of widows or separated parents (presumably wives). Dr. Morgan² of the South-East London Centre regarded 23 cases out of 75 entering the Centre in 1937 as attributable to poverty. At the Foster Street Sub-Centre 24 out of 53 new entrants were judged to have insufficient food. Dr. Cicely Peake of the South-West London Centre remarks in the same year upon the deleterious effect of casual earnings, forcing families to buy on credit at top prices. She states that it is common for a malnourished child to have a mother who suffered from anxiety, overwork, poor feeding and ill-health during pregnancy. A further interesting observation is that the younger children of large families tend to show malnutrition, especially when none of the elder ones is of earning age.³ This is strongly borne out by an enquiry by Dr. Morgan into the 10-year-olds in an East End school in 1937. Their nutritional classification and the size of family from which they came were :

Grade of Nutrition.	Number of Children.	Percentage of Children.	Average No. of Children in the Family from which they came.
I (excellent) . . .	25	16.5	2.8
II	108	71.0	3.2
III and IV (subnormal) .	19	12.5	5.8
Total	152	100	

¹ Report of the School Medical Officer, 1938, p. 18.

² *Public Health*, 1937, p. 25.

³ See *Nutrition and Size of Family*, Birmingham Social Survey Committee (Allen & Unwin), 1942.

Bad Choice of Food is in part a problem of poverty, as the woman with little to spend puts most of her money into starchy food, which is cheap and filling, in order that her family may not go hungry. All investigation shows that at the lower income levels diet contains too much starchy food and shows a deficiency in first-class protein and fats and in the protective foods, especially green vegetables and fresh fruit. The typical slum diet of our pre-war days, consisting largely of white bread, strong tea with plenty of sugar, pastry, bready pastes and sausages, cheap jam and margarine (only recently irradiated), may well be among the worst ever devised by mankind, so grossly lacking is it in protective elements. As income rises the consumption of bread and cheap pastry diminishes while expenditure on other commodities rises. Fruit and greenstuffs are the last to reach a level of adequacy, and deficiency in these is by no means confined to the poorer classes. A special investigation made in a secondary school showed the diets of 40 per cent. of the pupils as deficient either in fruit or green vegetables or both.

Bad choice of diet may also, as already mentioned, be due to parental incompetence, and broadcasted wisdom on this subject may not effectively reach the mentally dull and backward who leave our schools by thousands every year. They are sometimes too ignorant and weak to resist the caprices and tantrums of their children. Weak parents and fond earning sisters and brothers often keep children quiet or indulge them with far too many sweets, sweet biscuits and ice-creams. Youngest and only children are said to be specially liable to malnutrition arising from over-indulgence in sugar, which blunts appetite and is itself one of the least useful foods, having no protein, mineral or vitamin content whatever.

Bad Presentation of Food is in part a national failing and in part a problem of poverty and bad housing as discussed below. Much sound and practical work has been done in the food education campaigns conducted by the Board of Education and the Ministry of Food to bring teaching to the woman in the home. Demonstrations have been given in market-places, on tenement landings, and in the homes themselves. It is hoped that these activities will not end with the war; practical cookery teaching should be a part of the public services of every community.

Inability to Assimilate Food may arise from a multitude of causes: a history of illness leaving the body enfeebled; lack of sleep, fresh air, and exercise; bad housing; irregular mealtimes; nervous condition; psychological maladjustment and unhappiness. Its causes may, in fact, be pathological, environmental or psychological.

(a) *Pathological Causes.*

Birmingham found 41·6 per cent. of slight malnutrition and 21 per cent. of bad nutrition attributable to the enfeeblement of the child by sickness or disease, observing that cases classified under this heading overlapped extensively with those attributed to poverty. Dr. Morgan ¹ (see p. 33) found a history of serious illness in the following percentage of 10-year-olds in an East End school :

Nutritional Group.	Percentage with a History of Serious Illness.
I (excellent) . . .	14·3 %
II . . .	10·2 %
III and IV (subnormal) . .	45·4 %

The close relation between poverty and sickness has been so often demonstrated as to become a commonplace. It may suffice to quote the facts given by Dr. Spence of Newcastle-on-Tyne ² in a comparison between a group of children from one to five years of age from the city's poorest streets and a group of similar age from families of the professional class :

124 children of the professional class had had :	{ Pneumonia 2 ; pleurisy 1 ; chronic and recurrent cough 2 ; measles 6.
125 children from the poorest city streets had had :	{ Pneumonia 17 ; chronic or recurrent bronchitis 32 ; measles 46 ; recurrent chronic diarrhoea 6 ; abscesses, septic skin infections and otitis media frequent.

Dr. Charles observes in a note to the enquiry that the incidence of measles and German measles (rubella) before the age of three is more than twice as great in the overcrowded as in the better wards of the city and the death rate from these diseases twice as great. It is in the first three years of life that measles and rubella are most dangerous and most likely to have damaging results upon the constitution, particularly if the child is not able to have a proper convalescence in good surroundings.

Dr. Batten comments on the high proportion of children attending L.C.C. Nutrition Centres who have constitutions weakened by a series of respiratory, gastric, intestinal and infectious complaints.

¹ *Public Health*, 1937, p. 25.

² Annual Report of the Medical Officer of Health for 1933, p. 12.

(b) *Environment.*

Dr. Batten says :

"The triad of extrinsic influences—environment, diet and way of life—play a part in the state of health of any child at any time. They are not, however, inevitably yoked, and the evidence of the Paddington Centre points to environment and way of life as the predominant influence and not to food. The general environment is far from ideal ; in many cases families live in ill-lit, ill-ventilated, overcrowded rooms, sometimes in a basement. Sleep is curtailed and often disturbed, and too little vigorous and well-directed physical exercise is obtained. In addition there is often ample evidence of unhappiness in the home. With food it is different. Good food is easier to come by than a good home, and there is little evidence of underfeeding, although food habits often determine an unwise choice. Some good cheap foods like cheese and herring seldom appear. In most cases it is not ample food that is lacking but sleep, light, exercise and fresh air."¹

The bad housing conditions of some of the children attending the L.C.C. Nutrition Centres are more than once remarked in the reports. The housing of 93 new cases entering the Poplar, Hackney and Wapping Centres was classified as : very bad, 16 ; bad, 29 ; moderate, 36 ; good, 12.² The report adds :

"Among the 'very bad' cases there were two families sleeping five in a bed, and one family sleeping seven in a room ; and among the 'bad' there were three families sleeping six in a room. One family of five is said to have slept in one room with six cats."

At the Wapping Sub-Centre in 1936 one child came from a family of eight persons living in a one-room home, and another from a family of six living in a single room. Of eighteen children entering this Sub-Centre twelve were described as living in "deplorable" housing conditions.

Secondary schools show a markedly higher proportion of "Excellent" nutrition than elementary schools, and public schools a still higher one.

Other interesting observations are :

1. In elementary schools nutrition is slightly better amongst girls than boys, and girls appear to respond more markedly to improved nutrition and environment. The worst nutrition is always shown by 7-year-old boys.

2. The nutritional condition of adolescents in Junior Instruction Centres was very disturbing. Newcastle-on-Tyne reported one-

¹ L.C.C., *Public Health*, 1936, p. 21.

² L.C.C., *Public Health*, 1937, p. 22.

third of the 14-15-year-old boys at one of these Centres as sub-normal, and Liverpool found them poorly nourished as a whole.

3. The country child is, given economic equality, better nourished than the town child.¹

(c) *The Psychological Factor*—" *Good Food is easier to come by than a Good Home.*"

Dr. Batten's words ought to be written up in letters of gold in every Education Officer's room. In a report on the comparative progress of children in an ordinary babies' class, in nursery classes and in a nursery school given in the L.C.C. School Medical Officers' Report for 1937 (see Appendix IV) it is said that only 20 per cent. of the children in the ordinary infants' class had good homes while 33 per cent. had homes which the Care Committee workers described as unsatisfactory. While this distressing statement is isolated, it may not be misleading where the poorest schools are concerned.

The stomach is a highly nervous organ. When frightened or disgusted we are sick; when nervous, unhappy or depressed we lose appetite; when tired we cannot eat; children are often sick from mere excitement. Yet how often do we imagine a child's approach to food in the conditions of overcrowding: the impossibility of sitting down to a family meal; the staleness of a living-room which has been slept in; the general insanitary conditions of slum property and the ugliness of an over-intimate and unvarnished family life? Young things cannot thrive in such conditions—they must have happiness and wholesomeness in their surroundings. In the homely words of Moffatt's Bible, "Better a dish of vegetables with love than the best beef served with hatred."

The country child with a bad home has at least the resources of field, wood and stream to fall back on, with all their opportunities for independence and individual life. The town child may have only the playground of the mean streets, where kicking a football brings him before the magistrates. He is far more dependent on adults for happiness than is his country cousin, and where the home fails his plight may be miserable unless the school can come to his rescue.

One of the most encouraging signs of our times is the growth of happiness in the schools. Whereas literature and memory alike tell how school used commonly to be hated, the normal child now enjoys it. This is an absolute necessity if the school is to

¹ See, for example, Report of the School Medical Officer, West Riding, 1938, for a comparison of the nutritional state of children in rural and semi-rural areas and mining towns.

perform its essential social task : to build happy people with good bodies and good standards for childhood based upon their own childhood experience. A compelling reason for seeing that no child goes ill-nourished is that good feeding will make it a better parent, with the energy, good temper and nervous stability essential to a happy family life and the ability to judge from experience when children are thriving and properly fed.

Children of less than five years of age may be accommodated in nursery classes in the poorer districts. These classes are, however, only a half-way house, nearer to the ordinary classes of the infants' school than to the nursery school. The L.C.C. reported in 1937 the result of an interesting and important comparison between children in nursery classes and nursery schools (see Appendix IV) ; all the children in the nursery school had unsatisfactory homes ; but in spite of this they had achieved while at school a much better health record and state of nutrition.¹ The report concludes :

" . . . it was found that the children who derived most benefit from the scheme " (of nursery classes) " were those who were free from physical defects and receiving good food and adequate rest at home. The nursery class conditions do not wholly meet the needs of children who, through home conditions, are unable to have the rest, food and scope for childish activity which are so essential."

The conclusion reached was that the nursery school was able to compensate the child for an unsatisfactory home, but anything short of it merely represented an improved method of handling children from homes which are satisfactory.

The proportion of children classed on present standards as severely malnourished is small, but the numbers whose nutritional condition is less than satisfactory are very large, and the case of most of them is, briefly, that they live in an unfavourable environment. School feeding alone is not enough to remedy their condition, whereas the effect of open-air nursery schools, especially residential, is very marked indeed, and removal to the country produces results described as magical and lasting.² This thesis has been abundantly borne out by evacuation, where hostesses have seen with pride, not always unmingled with alarm, how " pernickiness " has given way to appetite which is often voracious, skins have cleared, septic throats and skin diseases vanished, and the town child earned the high praise of being indistinguishable from the country one. Food is, in fact, only a part of a child's regimen, and the whole of it must be tackled—sleep, air, exercise, clothing and, last but not least,

¹ Presumably they were admitted on a selective basis.

² See Report by Dr. Batten, L.C.C., *op. cit.*

security and happiness. The supreme specific is a good environment, and the effects of evacuation upon the national treatment of nutrition should be important and lasting. All children should spend part of the year in the country, at least until our towns have been so much improved as to constitute in themselves a healthy and beautiful environment for all their dwellers.

Some Medical Officers offer evidence that where children are divided according to educational standards the brightest classes always show the best nutrition and the backward classes the worst.¹ On this important point Titmuss (*op. cit.*, pp. 40 *seq.*) states that "Certain defects (mainly nutritional in origin) during early childhood lead to definite deterioration in intelligence," and again, "There are substantial reasons for thinking that dietetically balanced meals increase mental output." He quotes the excellent effect of giving a balanced breakfast to a group of infant school children at Roding, Essex, on their progress in school subjects. It may be that early nutritional care would contribute to lessen the growing² and very difficult problem of the dull and backward child, with all its implications of individual misery and social danger.

THE OSLO MEAL—"HEALTH DINNERS"

One of the London County Council's most interesting experiments in nutrition concerns the institution of "health dinners" based upon the "Oslo breakfast".³ The authorities of Oslo, having observed the difficulty for mothers in northern countries of supplying their children with adequate quantities of protective foods during the winter, made highly successful experiments in the provision of a vitamin-rich cold breakfast, which proved so successful that before the war something like half the population of Oslo were sending their children to take it, either free or for payment. In one of the L.C.C. Centres, therefore, a "control" group of necessitous children was

¹ An enquiry amongst 290 children in Lancashire showed that seven out of eight in the brightest (A) group came from families with the best income; there was more undernourishment in the B and C groups, especially among boys, and more physical defects, especially in the backward C group. Dr. J. A. Porter concludes that the elimination of the very large number of environmental (as opposed to hereditary) defects would do much to improve the mental capabilities of children.

² The Report of the Mental Deficiency Committee, 1929 (H.M.S.O.), stated that mental deficiency was increasing. It observed that the dull and backward often become the parents of mental defectives; that dullness, backwardness and mental deficiency are frequently associated with social and environmental handicaps, poverty, overcrowding, etc., and with the physical defects generally found with poor home conditions, particularly undersized physique, subnormal nutrition, and rickets.

³ *Public Health*, 1938, pp. 48 *seq.*

given an ordinary hot mid-day meal, and a smaller group was given a meal consisting of wholemeal bread, New Zealand butter, cheese, milk, and either half an orange, half an apple or a raw shredded carrot, lettuce or uncooked cabbage served as a sandwich filling.

Over a period of ten weeks the average boy taking the dinner gained 171 units of height and 181 units of weight as compared with 100 units of height and weight gained by the boy taking an ordinary mid-day meal. The average girl taking the health dinner gained 209.5 units of height and 139.7 units of weight as compared with 100 units of height and weight gained by the "control" girl.

These striking figures are very similar to those reported from Scandinavia and are borne out by further recent experiments by other Local Education Authorities. Good results have also been obtained by some authorities which have supplemented the home dietary of sub-normal children by similar meals rich in protective foods given during the morning recreational break. Few things could be easier to produce, simpler to handle and more beneficial in their effects than a daily carrot for the school child. This suggestion is commended to the Ministry of Agriculture.

THE HOUSING ASPECT—FOOD STORAGE AND COOKING FACILITIES

It must in justice be said that bad feeding is much fostered by bad housing. Apart from the fact that many children, especially in large families, are brought up in rooms where it is physically impossible for all to sit down together for a meal, hundreds of thousands of town poor have no proper facilities for the storage or preparation of food. Many live in rooms with no cooking facilities except a bedroom grate and no storage except a closed cupboard.

The New Survey of London Life and Labour says of the poorer quarters :

"It is the exception rather than the rule to have water ready at hand in unlimited quantities. In half the houses investigated water has to be fetched from outside the tenement, often from a tap on the landing, sometimes from across a yard, at others up or down three flights of stairs. Nor is the place for emptying dirty water always where the tap is ; it may be yet further away. The fetching and carrying of jugs and pails is thus often no small part of the day's work, and in fact one's nearness to the tap is spoken of as one of the compensations for living in the basement. Such conditions are obviously detrimental to good cooking methods. Where the sink for washing up is remote, the utensils used will be reduced to a minimum. Where running water is not readily accessible, a reluctance to prepare vegetables will be the result, and other foods will be bought in preference."¹

¹ Vol. vi, p. 314.

It adds that of 125 cases from various parts of London answering a questionnaire, only about one-half had a kitchen or kitchen-parlour to themselves, while two out of every five had no kitchen at all. Little more than one in ten of those who replied as to storage had a larder, and nearly one-half had to store food in a cupboard in the living-room. "Shopping ahead," said one girl, "depends entirely on what kinds of safe and cupboard you have." Without proper storage the housewife is forced to buy merely for the next meal, or to buy ready-cooked food, and to avoid perishables such as fresh milk and fish. The child who explained that mother's milk was better than cow's milk for baby because it did not turn in the night, and the cat couldn't get at it, spoke wisely in her generation.

The motives of conduct in poverty are sometimes very far to seek for the well-to-do. An old woman who was bringing up a ten-year-old grandson used, when short of money, to give him two-pence to buy two cubes of a proprietary extract. Asked why she did not buy herrings instead, she replied, "You see, we've only got the one room, and the smell of fish frying turns me stomach; and it brings out the mice, and I'm afraid of mice!"

The low-grade town mother, with her generally sub-normal health and her often undeveloped character, ought not to be forced to carry out her domestic tasks in the teeth of difficulties which would daunt the stoutest and the most resourceful. If all the meals in her house take on the character of picnic meals, it is not always her fault—she is living in picnic conditions, or what might be so called had they any element of light-heartedness about them.

THE NEED FOR COMMUNAL COOKING AND RESTAURANTS IN POOR QUARTERS

There is a good deal of censorious comment about certain aspects of the dietary of the poor. Much has been said of their alleged tendency to "cook with a tin-opener". Local authorities often report, however, that except for condensed milk tins they salvage far more food tins from middle-class than from working-class districts, especially the poorer ones, where tinned food (with the same exception) is a luxury. The sting is, moreover, drawn from the reproach by our present knowledge that food values are largely unaffected by canning, which has, on the other hand, the merit of making available, at moderate prices, products which are selected in quality, choice in kind and which impart to dietary that variety and interest of which the importance is now increasingly realised. Add to this

that they are labour saving, and they appear as a legitimate housewife's boon on that exhausting occasion, washing day.

The fish and chip shop has been widely abused, but its wares, endowed with valuable protective properties, are generally fresh and wholesome. Fresh fish is, moreover, home-produced by a struggling industry worthy of every support ; any institution which introduces it into popular dietary plays a useful part in the national economy. But there is a good deal of sameness about the fish and chip formula, and frying, especially in batter and with the inferior oil sometimes used, is not a good method of cooking, as the product is indigestible and "liverish". The fish and chip shop is, however, the restaurant of the poorer quarters. The woman whose family resorts to it may be too selfish or lazy to provide for them otherwise ; on the other hand, she may be in employment far away from her home and unable to provide a mid-day meal, or too tired to cook on her return, or the victim of lack of facilities, or of ill-health or constant child-bearing. An interesting study might be made of the social functions of this type of business in the lives of its customers. It is no reproach to the prosperous to meet their relatively mild domestic difficulties or seek entertainment by going to a restaurant ; the household in poverty has far more reason for doing so.

Humanity must be faced as it is ; it is bad psychology to expect all women to be domestic, or, even if they are, to make the continual sacrifice of time and energy necessary to compensate for shocking domestic conditions. The lesson of the fish and chip shop is that everyone not only wants, but needs, often imperatively, the possibility of getting meals without having to prepare them. If the present way in which their need is catered for is unsatisfactory, the solution is to provide alternatives by supplying meals for school children and sprinkling the poorer quarters with good restaurants, model public-houses and hygienic milk and potato bars, many of them serving food on the cash-and-carry system. "British Restaurants" have made a useful beginning, and it is to be hoped that commercial interests will not be allowed to bring about their abolition after the war.

The Reformed Public-House Association shows that the immediate response to the provision of meals at popular prices by a public-house is not only that customers spend on food some of the money that would otherwise have gone on drink, but that streams of children come to fetch hot meals for their homes. Interesting experience has also been gained from the State Management Districts and the Public-House Trust Companies. The public-house is ubiquitous

in the poorest quarters and deeply imbedded in the life of the population. It seems to offer great possibilities as the foundation of a real system of people's restaurants. Food and liquor should be made natural partners, and the provision of food on a socially sound basis should be made the condition of selling liquor for consumption on the premises.

FOOD DISTRIBUTION AND MARKETING

For many years, and notably since the Four Years' War, the food market has been heavily rigged against the poor housewife, even when knowledgeable and conscientious. Many women would gladly have given their family wholemeal bread had it not been substantially dearer than white; milk at 3½d. a pint was a luxury, permissible only for infants, and fruit at most seasons an almost unapproachable luxury.

These difficulties are, it appears, purely artificial and due largely to the creation of vested trading interests. Wholemeal bread ought to be cheaper than white. Vegetables can be produced in prodigal abundance, but the influence of the middleman on their retail price is a well-known scandal which authority seems helpless to check. Every summer and autumn the Kentish orchards are littered with fruit which it does not pay the grower to gather, while thirty miles away London children lack fresh fruit. Every year tales are repeated of great herring catches thrown back into the sea, while children lack fresh fish and fishermen struggle for a living. The control of basic food-prices and distribution built up in the present war should be the foundation of a permanent policy ensuring the essentials of a healthy, balanced and varied diet to every household, whatever its income.

THE FORMATION OF GOOD FEEDING HABITS

The subject of parental control appears in every section of this work with the inevitability of King Charles's head. If, however, some children are found to rule their elders from an early age, they must at least be trained as enlightened despots. The child must be caught very young, so that it will insist, not upon a toffee-apple, but upon something more like a raw carrot or an apple without the toffee. Its family may be encouraged to follow suit, and it will some day make a carrot-conscious parent!

It is also suggested that the Ministry of Food, which is, we understand, anxious not to appear censorious of established food habits

nor to arouse hostility by tilting avoidably against them, should use this opportunity to campaign about the formation of good food and drink habits in young children. It would, no doubt, be provocative and a source of hardship to ask the working-class mother to give up the strong, sweet tea which is a stimulant and pleasure to her, but she might well be amenable to a slogan of "Don't give the tots tea—it's a refresher, not a food!"; "Salads give a lovely skin"; "Mustard pickles aren't right for the mites", or "Bring the bairns up on brown bread." We should like to see on our hoardings such admonitions, wittily phrased, and accompanied by drawings as simple and amusing as Nestle's two cats.

The slogans would not touch the woman who from laziness lets her infant share whatever is going in the household, and uses sweets to bribe when she cannot control. They might, however, especially if humorous in their approach, make their point amongst those parents whose shortcomings are due to lack of thought rather than lack of character or goodwill. Let us take a lesson from the advertiser of proprietary goods; if the public can be persuaded that patent medicines work miracles and proprietary foods do all that they profess, surely their minds are open to the influence of statements and taboos of a more disinterested kind, and especially at the present time when a simultaneous appeal can be made to the two supremely powerful motives of parental care and patriotism.

THE EDUCATIONAL QUESTION—COOKERY TEACHING

The critics of the evacuees alleged that our educational system had failed to teach many of the mothers of to-day to cook. Many admirable domestic centres exist where thousands of girls learn cookery with enjoyment and profit, but it is true that there are still large numbers of girls in elementary schools who receive no domestic instruction, or only a quite inadequate amount, while in some schools the teaching is lacking in reality and unrelated to conditions in the poorer homes. In a certain mining community of poor class and hybrid origin, where, presumably, the mothers of to-day learnt cookery in the elementary schools of yesterday, the commencement of school feeding in 1933 revealed that the children could not be induced to eat meat which had been boiled or stewed; the local working class roasted or fried and that was all. As the stewpot was the only means of cooking available at the primitive feeding centre, a tin hut on the hillside, the meat was ground down to a brown gravy and served with a plateful of potatoes. This ignorance

of the homely and economical stew is staggering. What did the Committee set up within recent years by the Board of Education on the teaching of domestic subjects make of these and similar facts? Cooking is a natural source of enjoyment. Children love to make mud pies and feel the extreme of bliss in toffee-making or in the possession of a toy cooking-stove. If whole communities of women are ignorant, it must be that they have not been taught, or that they have been badly taught.

Cooking appeals to boys and girls alike. It is surely a mistake that schools look upon girls as the only pupils to be trained for home-making and the care of the young. The animal kingdom gives the lie to such a conception and, moreover, groups of men such as sailors, lumberjacks and explorers, who can hardly be accused of effeminacy, are found fully capable of performing their own domestic tasks, often with pleasure and skill. Cooking is taught to boys in certain schools in the North-East where most of the population is sea-going, and is a popular subject. The task of teaching cookery, admirably fulfilled in some places, might well in others be approached from new angles, girls and boys being allowed to work together and give treats to younger children, and tiny children allowed to play at simple cookery. The children should be interested and encouraged to experiment, while their parents should be encouraged to take pride in their offspring's achievements and copy them.

The Board of Education should forthwith put an end to the existing state of affairs, whereby children may make, week by week, dishes which they are not allowed to taste because they have not paid for the materials.

RECOMMENDATIONS

1. There should be a positive and permanent government policy ensuring the supply of protective foods to the whole population at prices within the reach of the poorest.
2. The appropriate authorities and Central Council for Health Education should be invited to launch a publicity campaign on the formation of good feeding habits in young children.
3. The experience of the war should be utilised to encourage permanent national restaurants, model public-houses, works canteens and communal cafés and kitchens on an adequate scale.
4. Education in cookery and dietary should be greatly extended

through school meals simply but excellently planned, cooked, and served, with special emphasis on nursery schools. A mid-day meal, adaptable to the needs of various ages, should be available in all elementary as well as secondary schools, either for payment or free of charge according to parents' circumstances.

5. There should be a wide extension of the Oslo meal in schools, as a means not only of improving dietary but of educating children and parents in the possibilities of uncooked foods.

6. Special efforts should be made to infuse reality and liveliness into the teaching of cookery and marketing in schools. Such teaching should be available to boys as well as girls, and should always be associated with lectures on physiology and health. The supply of cooking materials should be dealt with on the lines recommended by the Association of Domestic Science Teachers (see Appendix V). Children should always be allowed to eat what they have cooked. After the raising of the school age, particular attention should be paid to cookery lessons in the added years, and also in Day Continuation Schools.

7. Parents should be drawn into the efforts of the school to induce sound habits of dietary and skill in the planning and preparation of economical, well balanced and varied meals. Education in food values should also be more widely given by the Maternity and Child Welfare Centres.

8. The qualifications required for the appointment of a School Medical Officer should include experience with children from homes in which full nutrition and other necessities for optimum health are normally provided.

(d) *Juvenile Delinquency and Want of Discipline*

A London woman told one of the authors that she brought her boys back from Exeter because the local children taunted them at school that all London children were thieves. Dishonesty is, unhappily, widespread in our society. Innumerable people are ready to cheat over fares, steal souvenirs from ships, leave unpaid bills (a practice which is surely equivalent to theft) and defraud the community over income tax. Lower down the social scale there is a great deal of theft, not merely from the rich but from the working class itself. At the present time complaints are rife as to the widespread robbery of allotments, the epidemic theft of tools, bicycle

accessories, etc., from fellow workmen in factories as well as of firms' property. Top flats in working-class blocks have been extensively broken into and robbed while their owners were in air-raid shelters for the night, and the cutlery and crockery of canteens vanishes like mist before the sun. The modern tendency to dismiss pilfering by children as something they will grow out of needs to be carefully examined in view of the fact that so many of them not only cause great harm and suffering by their misdeeds but carry their delinquencies into adult life where they may lead to serious crime.

Respect for other people's property is not innate, but is actually contrary to human instinct ; it has to be inculcated. Those in whom it is lacking are often not so much perverted as socially untrained. To leave some things alone is the small child's first lesson in self-denial and social conduct and should be given so early as to become a part of the subconscious. The child born into a family of low social standard has little chance of this education. Since his elders never accept the social code, it is never " right " to him but merely a vast conspiracy which it is clever to outwit. Life does not make virtue particularly easy for him. His playground is frequently the street—it was so in the case of two out of three Shoreditch 11-year-olds in the enquiry referred to at p. 27—and it is there that he spends his holidays, to judge from the fact that two out of three of the 400 children in the same sample had not been away from home for as much as a week in the past twelve months. So he is subject to the constant temptation to steal from shops and stalls ; he is in surroundings where all pleasures cost money ; money means too much to him from too early an age ; delinquent companions are easy to come by ; theft offers adventure where no other adventure is ; finally, theft and its rewards give him a sense of individual consequence and achievement, the craving for which is inherent in all human creatures, but which may be denied him both in home and school. Honesty is an acquired virtue only skin deep with many of the human race ; it is little wonder if he fails to pick up even the veneer.

It might be easier to deal lightly with the accusations against the evacuees were it not that an examination of criminal statistics in relation to age shows a condition of things which is disconcerting. The Report of the Commissioner of Police for the Metropolis for the last four years available shows that 27·6 per cent. of the persons arrested for all indictable offences were 16 years of age or less, and 21 per cent. were of elementary school age. The crimes committed by juveniles were mainly simple ones against property.

JUVENILE CRIME IN THE METROPOLITAN POLICE DISTRICT, 1935-8

Crime.	Average Percentage of Arrests in Age-groups.								No. of Crimes recorded.
	10 yrs. and under.	11 and 12 yrs.	13 and 14 yrs.	15 and 16 yrs.	Total 16 yrs. and under.	20 yrs. and under.	21 yrs. and over.	Total No. of Persons arrested in 1935 (all Ages).	
1. Burglary and House-breaking .	2.4	4.1	6	9.9	22.4	41.3	58.7	568	5,733
2. Shopbreak-ing, etc. .	7.3	12.1	13.65	13.8	46.9	66.1	33.9	1,642	7,852
3. Larceny of Bicycles .	7.85	12.8	16.1	15.35	52.1	71.9	28.1	840	12,639
4. Larceny from vehicles .	9.4	16.2	18.1	10.4	54.1	65.8	34.2	819	7,296
5. Other simple larcenies	6.0	9.9	12.6	10.5	39.0	53.0	47.0	3,899	40,771
6. Shoplifting and stealing from stalls	4.5	8.1	8.3	5.25	26.15	32.0	68.0	1,980	2,043 (Shop-lifting only)
7. All other crimes .	0.6	1.2	2.3	7.0	11.1	27.25	72.75	8,034	16,534
8. Total—All crimes	3.7	6.4	8.5	9.0	27.6	42.9	57.1	18,034	94,852

A yearly analysis shows no downward trend in the proportion of arrests of any group of persons under the age of 16 years.

Further striking statistics for the year 1935 are :

All Indictable Offences.

Over one-fourth of all persons arrested were aged 16 or less.

Indictable Offences against Property as 1-7 above :

40	per	hundred	of	the	persons	arrested	were	aged	16	or	less
30	"	"	"	"	"	"	"	"	14	"	"
16	"	"	"	"	"	"	"	"	12	"	"
6	"	"	"	"	"	"	"	"	10	"	"

In only about 10 per cent. of cases was the arrested person acquitted or the charge withdrawn or dismissed.

It appears that the crimes committed as in classes 1-7 of the table were roughly seven times the number of persons arrested for them. It may be inferred :

That owing to the greater liability of children and young persons to be arrested, the above figures may convey an exaggerated idea of the *proportion* of crimes committed by them.

That the *number* of young offenders arrested, on the other hand, represents only a fraction of those committing these types of crime.

The number of children of elementary school age arrested in the Metropolitan Police area for crimes of all types has risen steadily from 1935 (when they numbered 3,400) onwards, in spite of evacuation. It would not be unreasonable to suppose that three times these numbers, that is, something over 10,000 school children, committed indictable offences in each year. This number may represent only a small percentage of the school roll of the Metropolitan Police District, but if, as this is mainly a boys' problem, we relate it to boys' departments only, it is sufficiently large to show the frequency with which boys attending schools in the worst neighbourhoods may have the young offender as a schoolfellow. Children may learn more from their fellows than from those set to teach them.

If, therefore, the Reception Areas complained that some of the children sent to them were thieves, this was no more than the truth, and sinister possibilities suggest themselves as to why some children were recalled to their homes.

Professor Cyril Burt's classic study of 200 delinquents¹ whom he regarded as typical led him to conclude that it was impossible to attribute crime in general either to a predominantly hereditary or to a predominantly environmental origin. He adds :

"Of environmental conditions, those obtaining outside the home are far less important than those obtaining within it ; and within, material conditions such as poverty are far less important than moral conditions such as ill-discipline, vice and, most of all, the child's relations with his

¹ *The Young Delinquent*, by Cyril Burt (London University Press), 1927.

parents. Physical defects have barely half the weight of psychological and environmental. Psychological facts, whether due to heredity or environment, are supreme both in number and strength over all the rest. Intellectual conditions are more serious than bodily; and emotional than intellectual. . . ."

In a more recent work¹ produced under the auspices of the Liverpool University Department of Social Sciences, Mr. Bagot has pointed out that the three small groups studied by Professor Burt were inadequate in numbers to form a basis for general conclusions, and were, moreover, representative of the more serious type of case encountered by a psychologist.

Mr. Bagot states that juvenile delinquency is becoming increasingly a problem of the larger towns and of the industrial areas. It is, in the words of a Blue Book,² "out of all proportion" higher north than south of the River Trent. Mr. Bagot shows that it has been recognised for the past hundred years as a special problem of Liverpool, and he examined every case in which a juvenile, that is, a boy or girl under the age of 17, was found guilty in Liverpool of an indictable offence in the years 1934 and 1936, a total of over 3,200. The delinquents were almost all boys. (The author points out that there is a problem of sexual delinquency amongst girls which does not appear because the manifestations are not indictable.) Their numbers rose from 18 to 24 per thousand of boys of these ages in the population. More than one-third were recidivists, that is, they had had one or more previous convictions. They came overwhelmingly from the slum districts of inner Liverpool. They, especially the recidivists, came largely from big families with an average of 5 to 6 children, and especially from amongst their older children, pushed out of overcrowded homes into the street by their juniors and getting scant parental attention. Nearly half the recidivists came from families of which another member had been tried for an indictable offence. One in two first offenders and three in four recidivists came from homes where parental discipline was unsatisfactory, and many came from homes where the circumstances were atrocious and the normal pattern of family life broken. Nearly one-half were dull and backward and almost all lived in poverty. So many came from overcrowded homes that the author was inclined to regard this as one of the principal causes of delinquency. Unemployment was a very important encouragement to crime in boys of 14 to 16 years.

¹ *Juvenile Delinquency*, by J. H. Bagot (Jonathan Cape), 1940.

² *An Introduction to Criminal Statistics*, Cmd. 3853, 1929.

Mr. Bagot's conclusions as a result of this large-scale study are to stress the importance of environmental influences as a cause of juvenile delinquency, especially where offences are repeated. It is a problem of the slums. A number of facts, however—that the delinquent comes from amongst the children thrust out on to the streets by overcrowding, that many of them have abominable home circumstances, and that only a minority come from homes where parental discipline is satisfactory—show that there is much common ground between him and Professor Burt in their recognition of juvenile delinquency as born of the failure of home life. Both found a high percentage of delinquents to be of sub-normal intelligence.

No attempt can here be made to examine juvenile delinquency in the special conditions of war time. It is legitimate to conclude that in peace time, however, it was, at least in part, another of the problems of parental failure, resulting either from lack of affection or from a lack of that social standard which lifts affection above the instinctive and gives it supreme value as an incentive to right conduct.¹

The key to much delinquency, juvenile and adult, must be sought in the "problem family", a group which should be the object of early and close study from Poor Law, police and other social records as well as in the field. This problem will be found to neighbour on that of the dull and backward child, which is unhappily a growing one and should receive the urgent attention of educationists. The detection of such children at a very early age and the provision of special education and recreation for them would militate against their becoming delinquent. Probation often comes too late.

Apart from measures to deal with these special groups, the right steps to combat delinquency in the young seem to be those which promote happy home life, such as economic stability, good housing, provision of a wide range of recreational interests for both parents and children, and good education in parenthood.

The operation of such long-term measures is, however, slow, and meanwhile many children are leading warped and loveless existences in unhappy homes. It has been represented to the authors that the provision in Section 1 of the Children and Young Persons Act, 1930, making it a misdemeanour for a person having the custody of a child or young person to neglect him should be more extensively used, and

¹ Since this was written, *Young Offenders*, the report of an enquiry instituted by the Home Office in 1938, has appeared. It stresses the effects of broken homes, abnormal family atmosphere and defective parental control, pointing out that in London 30 per cent. of juvenile offences are committed after dark when children should not be out alone.

it is easy to conceive it as applied, for instance, in cases where parents unreasonably refuse to co-operate in common-sense measures for a child's health. It is difficult not to feel that the doctrine of parental responsibility is sometimes upheld at the expense of the child, and that there is a taint of Poor Law in our present attitude. Appendix VI contains a note from a correspondent on cases recently prosecuted by the N.S.P.C.C. which illustrates the appalling and criminal futility of the present policy of imprisoning parents, often mentally sub-normal or vicious, for neglect and allowing them on release to resume the custody of the neglected children. Those children are entitled to indict the Bench. The question of whether, all else having failed, parents should be permitted or ordered by a Court to relinquish their children altogether is one calling for urgent and anxious consideration. The question must be posed as two-fold: should the child be helped to escape altogether from a bad home or one where it is unwanted; and what assurance can be given that it will, if taken from its home, be so cherished as to obviate the grave emotional dangers arising from that situation? ¹

As a part of their education against pilfering all school children should have some possessions and a place in which to keep them. They should not be let loose on the community without a determined effort having been made to teach them an elementary social code, including a simple philosophy of property capable of being taught without hypocrisy to the poorest.

SWEARING

There were complaints that evacuees used bad language, often at very early ages. Swearing in small children is meaningless. Recently in the hopfields a child of apparently some three years was seen sitting on a coat and stripping hops, with a dummy in her mouth. She ran short of hops, removed the dummy, gave a piercing yell of "More bleedin', bloody 'ops!" and put the dummy back again. Her trouble clearly was that she saw too much of her elders.

We were unable to take this subject very tragically. Much swearing has no evil intention at all, and where it is vicious it is the underlying spleen and cruelty which are serious. Swearing does, however, merge into obscenity, which is coarsening and offensive,

¹ A study of the boarding-out of children under Scottish Poor Law and of child placing in Canada and U.S.A. would be pertinent. The U.S.A. Department of Labour includes a Children's Bureau, and important White House Conferences have been held in order to formulate national policy as to child welfare.

and, like other *clichés*, it militates against articulateness. Where character is wisely built, swearing can be left to look after itself. The American slang of the movies is a healthy competitor, considerably more amusing and expressive to the layman.

LYING

Lying should be dealt with realistically, like stealing, as a source of social disorder. Children will readily grasp how easily it can foster cowardice, how useful truth-telling is as a personal discipline, and how indispensably it contributes towards the difficult problem of living together in friendliness and confidence.

DISOBEDIENCE AND INDISCIPLINE

The complaints of disobedience and indiscipline go back more directly than any others to the defects of family life. Only a person possessed either of an accepted code or an adult character can discipline others and call forth the respect necessary to obedience. It is far more difficult to train children to obey, both in letter and in spirit, than to be physically clean, and parents who are themselves undisciplined and childishly undeveloped in character have little hope of controlling their offspring. Parental control must be built up painfully and slowly from the bottom by giving the children of to-day a better personal code and sense of social duty, and giving the older boys and girls practical experience of child management.

Complaints of rudeness, especially between the sexes, are difficult to comment on. There is, perhaps, a need for psychologists to study the emotional relations of family and sex life under the stresses of bad living conditions and to advise educationists in accordance with their findings.

RECOMMENDATIONS

1. A study should be made of the problem family.
2. Steps should be taken to detect dull and backward children at a very early age, to give them special medical and other attention and to provide separate classes for them in school.
3. The fuller use of Section 1 of the Children and Young Persons Act, 1930, making it an offence to neglect a child, should be considered. The means of enforcement and the legal definition of "neglect" should be urgently examined.
4. Psychological study should be devoted to family and sex relationships in conditions of poverty and overcrowding.

(e) Dirty and Inadequate Clothing

It was a common complaint that evacuated children arrived at their destination in clothing and footgear which was insufficient, worn out and dirty. Those evacuated from the slums of Grimsby, Hull and Manchester were said to be :

" . . . not only very badly equipped, but they brought no change of clothes and the garments they wore often had to be burnt as they were verminous. In other cases, the householders had to keep the children in bed while they washed their clothes. Some children arrived sewn into a piece of calico with a coat on top and no other clothes at all."

Lindsey, Lincolnshire, reported that " many children arrived in rags." Some were completely re-clothed by their hosts, whose generosity in this respect was widespread and should be specially acknowledged ; it is unhappily true that many of these children were taken back to their homes immediately afterwards. In other cases the utmost difficulty was experienced in persuading parents to send more clothing, and some districts reported that, whereas in September, 1939, there was a problem of clothing and particularly of footgear, by January, 1940, it had solved itself, owing to the return home of the most poorly clad children. Others reported continuing difficulty, especially as regards footgear. Somewhat later, local clothing funds were set up in the reception areas under official auspices.

A report rendered to the Newcastle-upon-Tyne Education Committee states that :

" During the week preceding the first evacuation the rehearsal provided the opportunity for a census to be taken of the school children to be evacuated to ascertain what percentage had insufficient equipment. This census showed that of the 31,000 children registered for evacuation in September 1939, 13 per cent. were deficient in footwear and 21 per cent. were deficient in clothing. . . ."

The School Medical Officers of some authorities report upon the condition of children's clothing. For example, in 1938 the school nurses of the London County Council classified the clothing and footwear of children in elementary schools examined at routine medical inspection (when, no doubt, they generally wore their best, sometimes including underwear bought for the occasion) as

Good, 54·6 %

Fair, 45·1 %

Poor, 0·3 %

Similar figures were described by the Chief Medical Officer in 1935

as "very satisfactory" and a great improvement on former times. They show, however, nearly half the children, even on these pre-announced occasions, as less than satisfactorily dressed, and when it is considered that this average includes the schools in the best quarters, and that the position in the poorer schools is presumably much below the average, it can hardly be agreed that the position is satisfactory. There is surely no point in averaging the condition of children's boots and clothing; a report on the facts as ascertained by the nurses on their surprise visits to the poorer schools is the only information which can be of value, and this ought to be obtained and published in future reports.

Social workers and teachers agree that the condition of poor children's clothing is very unsatisfactory. It would probably be true to say that, while the child "sewn up for the winter" should now be an anachronism, the children of the lowest stratum do not know what it is to have a spare set of underclothing; they have no nightclothes, but sleep in their day underwear; warmth is provided by an accumulation of cheap garments worn one above the other and excluding air from the skin; overcoats and mackintoshes are never worn, and satisfactory footwear is rarely found. Some boys are brought up to wear no underclothing but a shirt, cotton or union, and the effects of this upon health should be urgently examined.

The criterion by which the adequacy of children's clothing is at present judged is unknown, and it would be very desirable that minimum standard outfits should be recognised as a basis for obtaining statistical information, a safeguard against superficial judgment and a desideratum towards which responsible persons should work. Evacuation has led to the formulation of such a standard, both by Women's Voluntary Services and by the London County Council, and this might serve as a starting-point.¹ Handkerchiefs should be included as essentials, and children should not be allowed to attend school without them. They might be made in class at a nominal cost.

THE COST OF CLOTHING A FAMILY

Various enquiries, from Charles Booth's onwards, seem to suggest that the minimum amount necessary to clothe a child prior to the war was about 1s. a week and that the necessary expenditure for a family of five persons was from 5s. to 6s. a week.² The clothing club with 1s. per week subscription comes near this level for one

¹ See p. 65, note.

² We are not satisfied as to the adequacy of these estimates.

person. Careful housewives with a steady income at the lower levels do provide for their families at something like this rate. To do so, however, requires economic security. If the breadwinner is in casual work or subject to short and broken time the housewife will not be able to afford the regular 1s. a head every week. If he is unemployed the allowances paid out of public moneys, although they have the great advantage of regularity, are not necessarily calculated to provide for clothing on this scale. If the mother is a bad manager, she will never face the fact that so large a slice of income ought to be devoted to clothing ; if she is a mis-spender, appearances will probably not matter to her and she may put clothing almost last among the family's items of expenditure ; and, finally, unless she has a hard head, a good background and a capacity to resist the incessant pestering of the canvasser experienced in breaking down " sales-resistance ", she will very often pay her money into a type of clothing club which, while taking an amount that ought to clothe her children decently, gives her such infamously poor value that they never know what adequate clothing means.

METHODS OF BUYING CLOTHING

The question of the supply of good and inexpensive clothing is long overdue for investigation and reform. Something has been heard of the abuses of instalment purchase of furniture, and something of the scandals of moneylending. Yet the public at large know next to nothing of that vast instalment purchase organisation, the clothing clubs, and still less about the extent to which it can at its worst become the vehicle for moneylending of the most extortionate type, with club checks used as promissory notes.

The purchase of clothing presents real difficulty to the poorest class inasmuch as many garments and most footwear represent a capital outlay greater than they can afford out of income. This means that the housewife must either save or borrow to buy new goods or else buy second-hand. This is a dangerous position which certain elements in the commercial world have not failed to exploit.

The subject is a complicated one, of which a serious study ought to be made, with full publicity as to its results. Meanwhile it is proposed to give only the briefest facts as to the varying methods of purchase and the transactions surrounding them.

Some visits paid amongst the long unemployed in 1935 produced the following information :

METHODS OF BUYING CLOTHING

	Pawn- brokers and Second- hand.	Clubs and Tally- men.	Stalls and Markets.	Shops for Cash.	None bought in Un- employ- ment.	Total.
	(1)	(2)	(3)	(4)	(5)	(6)
London . .	15	7	10	5	8	45
Birmingham .	12	10	2	3	5	32
Total . .	27	17	12	8	13	77

Those in column 5 were generally respectable people whose habit was to pay cash and who had been unwilling to adapt their buying to the shifts of extreme poverty. They lived by conserving what they had with painful thrift, and sometimes received a little help from relatives.

As regards those in the other columns it must be remembered that, in so far as they were labourers (and this class always bulks very large amongst the unemployed), those with large families may well be better off as unemployed than as employed, owing to the security of income from public moneys. It is doubtful, therefore, whether their buying habits are greatly affected by unemployment. The table probably gives, in spite of small numbers, a fair picture of the buying of the poorest class in the towns mentioned.

The small part played by outright purchase of new goods for cash is noteworthy. The woman of the best type either saves up and buys, often in the sales and from unpretentious and old-established shops, or joins the Co-operative Society's club, or clothing club run by a neighbour or by a local shop known to her to give good value. Such small clubs may charge no "poundage" and represent a genuine effort to meet the difficulties of people of low income. The less good manager, if she wants to pay cash, buys cheaply, and, as a rule, badly, from stalls and markets, or purchases second-hand, getting generally better value but running the risks already mentioned that the goods may be infective or contain the live eggs of lice. The fact that the above Table shows one in three of the families buying second-hand is striking, and lends force to the contention that used clothing should be compulsorily sterilised by the public health authority of the district in which it is to be offered for sale.

Nearly one-fourth of all the families in the above Table (the figure for Birmingham alone is one-third) bought by instalments, and the proportion resorting to this method of purchase in some industrial districts would be exceedingly high. While it is recog-

nised that such arrangements vary widely and that to cast general aspersions on them would be wholly misplaced, reference ought, nevertheless, to be made at some length to those of certain types which are amongst the many leeches upon the body of poverty.

These "clubs," whose customers run into hundreds of thousands, normally sell £1 checks for 2s. down plus nineteen weekly payments of 1s.¹ They employ canvassers on commission who take the "poundage" of 1s. per 20s. on new business, and 1s. 8d. for collecting the remainder, so that the value of the check to the issuing firm is 18s. 4d. If the firm are not distributors but merely providers of credit, they get commission from the shops exchanging their checks, which are always those at the cheap end of the trade; it appears that 17½ per cent. is common and higher figures are sometimes found. The shop then prices up the goods in order to cover, or partly cover, the commission and protect its own profit, so that the housewife for her 21s. may get articles normally sold for 16s. 6d. or even less—a figure as low as 12s. 6d. has been mentioned. She can use her check as soon as she has made the first payment on it. At the shop, however, she is intimidated because she cannot offer cash nor go elsewhere, and will take the shoddiest goods—even to Japanese drapery of an almost incredibly low standard—at inflated prices without protest. In order that she may appear to be buying at the normal terms, the pricing-up may extend to all goods in the shop and affect any customer buying for cash.

Checks are, it appears, sometimes taken as deposit on furniture, wireless sets, etc., thus facilitating heavy commitments which could not have been undertaken if the check-holder had had to lay down a sum in cash.

Some "check" firms have, or deal with, warehouses, and their agents sell from illustrated catalogues.

The caretaker of a large block of working-class flats has thus described the outlook of the less desirable type of check-selling firm and the methods of their canvassers:

"To get people into debt and then keep them in it is the sole aim of firms that I shall discuss. . . . They may call it 'business' or getting 'fresh orders' or any other term they like, but they are not concerned whether a man's children have shoes or blankets on their beds, but they are concerned in selling 'tripe' at exorbitant prices, and when the bill is nearly settled, in sending a 'high pressure' man along who by his very persistence and eloquence coupled with such phrases as 'A special offer to an old customer' or 'I saved this specially for you—could have sold

¹ Conditions of sale vary, e.g. if the check is not used before six payments have been made, the premium may be waived.

them ten times over,' but, in the last resort, by 'Now, Ma, if you only give me an order for a few shillings I'll be satisfied. If I lose your custom it makes me look bad at the Head Office, and after all we've all got to live!' is usually successful. So back goes Mrs. X. into debt. I have mentioned 'tripe'—by this I mean shoes with compressed cardboard soles, cotton blankets, kiddies' blazer suits of very inferior flannel, in fact most 'Tally' goods are very conspicuous by their poor quality."

This correspondent mentions a firm carrying on large scale pawn-broking, who sell a nominal £5 2s. worth of checks for £4 10s., to be presented at their own shops where the goods are mostly unredeemed pledges. Each check has a nominal value of 6s. and is sold for 1s. (including 6d. poundage) and eleven weekly payments of 6d., so that the £4 10s. outlay should bring in £5 8s. 6d. at the end of twelve weeks. The checks should then be presented to the original vendor and exchanged for goods. They are often, however, used as promissory notes in transactions so fantastic as to be well-nigh incredible.

Mrs. Smith is the owner of seventeen 6s. checks purchased for £4 10s., or about 5s. 3½d. each. She can sell them for 1s. apiece and collect the full price of 6s. 6d. over the following eleven weeks. Mrs. Brown, however, comes to her for a loan. "I'm short of cash," says Mrs. Smith. "Here, give me 6d. for a clothing check and when I've fetched some money I'll buy it back from you." So Mrs. Brown parts with 6d. and gets a check. A little later she calls on Mrs. Smith, who now professes to be in funds, and who "buys it back" for 3s. Mrs. Brown, must, however, pay the full price of the check in return for the loan, so she pays Mrs. Smith a further 6d. a week for twelve weeks, thus paying 6s. 6d. for a 3s. loan. Mrs. Smith has her check to "sell" again on the same terms, and perhaps within a few hours. The same check, it appears, is "sold" time after time until it is filthy, remaining throughout, except for brief intervals, the property of the original purchaser until she chooses to make a genuine sale of it to a customer who wants to buy goods. The mind reels before the unlimited profits of these outrageous transactions; the authors would have hesitated to credit them had they not been vouched for by one of their number from long experience.

An interesting note on clothing clubs, including information from an ex-employee of one of them, is given in full in Appendix VII.

HOME NEEDLEWORK—MAKING AND MENDING

Making up cheap remnants, making-over used clothing and mending clothes in actual wear count for much in the condition of

the family wardrobe, and the only woman, even of the middle class, who can keep a brood of children tidy is the one who always has a needle in hand and a sewing-machine near by. But a sewing-machine is far beyond the reach of the poorest, and the absence of any access to one or to a clean, clear table has a great deterrent effect. The poorer type of factory girl wears and throws away, and in time becomes one of the women who might never have sat in a needlework class in their lives. Some women attending the Mutual Service Clubs of the National Council of Social Service have cried because they could not hold a needle. It may be they are the elementary school girls of yesterday who have forgotten, or the children who have slipped through the educational net and never learnt, but certainly the eagerness with which some of them seize the opportunity for instruction afforded by these unpretentious and practical organisations shows that far more should be done to help them. Any "Make and Mend" organisation evolved during the war should form the basis of a permanent service, the aim of which should be to offer every woman facilities for machining, sewing and pressing.

HYGIENE IN CLOTHING

This subject has been partially dealt with under bodily hygiene, where the importance of wearing clothing at once warm and airy and changing it at night has been stressed. School camps and resident country colonies for children should permit every child, particularly those from the poorer and the less responsible strata, to learn the requirements of communal life. When the child goes to camp or on holiday, it is possible to insist that it shall be provided with night clothes and a personal comb, toothbrush and towel. These exactions are accepted by parents because a benefit is being conferred on them and because the child itself is interested, as a rule passionately, and they want to satisfy it; and because humiliation will result if it cannot produce what its schoolfellows do. Once the child has had these things it often insists on continuing to have them, and its standard is permanently raised.

The particulars of domestic water-supply given below show how difficult the housewife's task of laundering is often made by bad housing. When, as often, she is faced with the alternative of washing clothes with water boiled in a kettle or sending them out to a laundry, the problem of keeping a family of children clean must be of the utmost difficulty, especially when they have few spare garments

and their playground is the smoke-grimed street. The Newcastle-on-Tyne Dispensary ¹ reports :

"In many instances washing has to be done in these communal living and sleeping rooms, all water being carried and heated on the fire. The common staircase and passage is the usual drying ground.

"The public washhouse is an alternative of which some women take advantage ; there is, however, the difficulty of the charge of 6*d.* per hour, and frequently the necessity of making arrangements for some one to take charge of the younger children in the absence of the mother."

It is clearly difficult to criticise the housewives' standard of hygiene where housing is still of this standard. White fabrics cannot be washed to a good colour without boiling, and, even so, much of the good work may be undone by bad drying conditions. There is as yet no good answer to the difficulties of the townswoman in congested areas except municipal washhouses or the bag-wash. The latter is cheap and something like 80 per cent. of the population of poor London districts are said to use it, but it is also very rough and goods of poor quality are quickly worn out when consigned to its untender mercies. No attempt has been made by the authors to explore why so few housewives appear to use the public baths (although reasons are suggested by the Newcastle report), but they suggest that an enquiry into the substitution of municipal or public utility company bag-wash might be fruitful.

THE PROBLEM OF FOOTWEAR—"BOOTS FOR THE BAIRNS"

The provision of footwear in poverty is peculiarly difficult owing to its substantial cost and constant need of renewal or costly repair. It is doubtful whether the labourer's wage in this country, even when it is steady, reaches "leather footwear" standard for more than a couple of children. When it is casual, the housewife's difficulties become acute and almost insurmountable. The fact that the country labourer does somehow manage in the majority of cases, generally by special efforts on the part of his family such as berrying, hopping and field work by the wife, to provide himself and his children with the stout boots necessary in the country is evidence both of the thrift and shrewdness of his wife and the honesty of the firms with whom he trades.

The Ministry of Labour's recent enquiry ² shows the industrial worker's household as spending an average of 7*d.* per person (in-

¹ *Report of an Enquiry into the Diet and Household Expenditure of Unemployed Families*, December, 1935.

² *Ministry of Labour Gazette*, December, 1940, and January, 1941.

cluding children) per week on footwear and repairs, and the agricultural worker's household 5*d*. Country children are, nevertheless, often better shod, owing presumably to the better value obtained in purchasing.

Compulsory school attendance obliges every mother to keep her children of school age in a condition to go out of doors in all weathers. In towns the school is generally near by, and the children can make do in summer with plimsolls. When winter comes the careful mother has done her buying, often, especially in London, through boot clubs run by the school, although it means a great deal to expect a labourer's wife with several children to put aside enough to keep them and her husband shod, and she herself is often but meagrely provided. For the unthrifty and those who have resorted to the clubs supplying boots made with "compressed cardboard soles" the winter is a time of constant harassment.

Through the winter, therefore, the town schools in the poorer quarters have a continual struggle to keep their pupils in attendance, and footwear for school children is a matter of concern in most communities. Many towns have a public fund, sometimes run by the police, for charitable provision. In some instances teachers are found giving out boots from parcels sent by the more prosperous parents, or even providing them out of their own pockets.

Evacuation took place in summer weather before the less satisfactory town parents had been obliged to make their annual effort. Those parents who did try to provide footwear had often no idea of what was needed in the country, while some others made no great effort. As a result, hostesses found much difficulty in keeping the children from the poorer type of family shod.

Boot and shoe repairs are a matter of difficulty to the poor owing to their expense. In a thrifty household the shoes are of good enough standard to repair, and the father generally mends them. Rubbishy uppers, however, will not take new soles and, even when they are good enough to do so, skill or money for repairs and spare footgear for replacement during the process may not be forthcoming, so that they are worn and thrown away.

The Wellington rubber boot has superseded leather footwear in some homes in both town and country. This is a mixed blessing, as, if constantly worn, its effect upon the feet is bad owing to lack of ventilation. If it is worn without stockings, sores soon develop. Occasionally worn in bad weather it is, of course, admirable and a safeguard to health, but it should supplement rather than replace leather.

It is suggested that an expert committee should be set up to study the provision on a permanent basis of good, inexpensive and well-designed footgear for indoor and outdoor wear.

THE EDUCATIONAL ASPECT—NEEDLEWORK INSTRUCTION

How does it happen that some girls who have been through elementary schools are found as mothers who can hardly hold a needle? Perhaps because needlework instruction, like other domestic subjects, is sometimes admirable while at others it is lacking in reality and insufficiently related to the actual needs and conditions of the pupils' lives. The Board of Education allows small sums of money for the provision of materials on which needlework is to be taught, but insists that they shall be recovered from the children who want the garments. As a result, the teacher is faced with the task of collecting small sums, at the rate of perhaps $\frac{1}{2}d.$ a week, and children who fail to pay with regularity may be publicly dunned in class. It is suggested that the practice of recovering these funds should be modified on the lines recommended in the excellent memorandum summarised in Appendix V. A premium should be put upon practical work by allowing the poorer school children to buy for a nominal charge any garment they can make in order that the parents may be educated. The cost must compete favourably with that of second-hand and shoddy new goods. The conscientiousness of the teachers and the limited time devoted to needlework should be sufficient safeguard against waste or extravagant expenditure, and even if the garments made under this system proved to be numerous, the production of a consuming zeal for needlework is hardly a result which any Education Authority ought to deplore.

It is suggested that the various departments of schools should render mutual service in this matter of clothing. The extent to which older children in working-class homes are the nurses of younger ones and the affection which they normally show for them could be utilised as a powerful motive to create interest in an enthusiasm for practical work done in the schools for the benefit of the little ones. A girl who did not care to sew for herself might feel quite differently about making something for "our baby". Sewing for the nursery school or class would be fun and personally rewarding. Girls would enjoy mending for boys, and boys tailoring and pressing for girls, as well as mending for themselves as sailors do.

BEDDING AND BEDCLOTHES

It is shocking to realise that in our country to-day many children in the poorest homes sleep on the floor, many sleep covered with old coats, and many more sleep in most of their day clothes under bedclothing which is altogether inadequate. Amongst the respectable, lack of bedclothing is one of the surest indications of poverty, and people fallen on evil days will often keep up appearances in their clothing while blankets are worn to a shadow. Visits during the industrial depression showed home after home where the family stock was a single pair, bought by the couple on marriage and never supplemented, however many children there might be. Allowances from public funds are not calculated to provide for household renewals or the needs of an expanding family.

Income, both in employment and unemployment, ought to be raised to a level where it will buy blankets, essential in our climate, but research might also be instituted into cheap and good substitutes. Bad clothing clubs, through which blankets are often purchased, should be eliminated.

Minimum standards of price and quality have been too little studied and too much has been left to the mercies of commerce. Science and trade should be the servants of all classes of the community. At present the scales are doubly weighted against the poorest class; they have less money, and their money is worth less, in part because they are exploited and in part because there is an absence of research and reputable large-scale production on their behalf.¹ Even the most careful of the poor must often buy less advantageously than the middle class, and their needs are much less carefully studied. One of the best means of social equalisation clearly lies in the promotion of honest selling and good buying. Trade should be not an end in itself but the promoter of good living for even the humblest, and a nation famous for dealing honestly abroad should be at all pains to examine whether it deals honestly at home.

RECOMMENDATIONS

1. A Royal Commission should be set up to enquire into the instalment purchase of soft goods and footwear.
2. The foundation of a National Institute of Domestic Affairs to act as a centre of research and propaganda should be considered.
3. A minimum standard of essential clothing for children should

¹ The authors distinguish between production and trading. The Co-operative movement would not, however, they presume, profess to concern itself with the problem of poverty. "I can't afford to shop at the Co-op now" is, in fact, a melancholy milestone in the descent of the respectable.

be drawn up to permit of a better judgment as to whether children are adequately clothed.¹

4. The Board of Education should consult appropriate bodies on practical needlework teaching for adults in :

- (i) Parents' clubs attached to elementary schools.
- (ii) Maternity and Child Welfare Centres.
- (iii) Women's clubs such as the Mutual Service and Social Service Clubs promoted by the Regional Councils of the National Council of Social Service.
- (iv) Afternoon sessions of Evening Institutes.
- (v) Afternoon sessions of various educational institutions.

5. The Board should :

- (i) Reform their system of recovering money spent on materials for needlework in elementary schools, framing instead for each school a policy according to its needs. (See recommendations of the Association of Domestic Science Teachers, Appendix V.)
- (ii) Give wide publicity to the methods adopted by the best schools to lend reality to needlework instruction and make it a means of service to the family and the community.
- (iii) Provide for boys to be taught simple tailoring, mending and knitting.
- (iv) Study the means of enabling older children to contribute to the problem of footwear, e.g. by making rope-soled sandals, felt or leather slippers, and carrying out simple repairs.

6. An enquiry should be made into the provision of municipal bag-wash facilities.

¹ The L.C.C. has laid down that children about to be evacuated should possess :

Girl.

2 vests.
2 pairs knickers.
2 nightgowns or pyjamas.
2 bodices.
3 pairs stockings or socks.
2 either (a) warm frocks.
 (b) jumper and skirt.
 (c) tunic and jumper.
1 coat and 1 mackintosh or 1 lined mackintosh.
Either 2 pairs strong shoes or 1 pair shoes and 1 pair wellingtons.
1 pair slippers or plimsolls.

Boy.

2 vests.
2 pants.
3 shirts.
2 pair pyjamas.
3 pairs socks.
1 jacket.
2 pairs knickers or trousers.
1 jersey or pullover.
1 coat and 1 mackintosh or 1 lined mackintosh.
Either 2 pairs heavy boots or shoes or 1 pair of boots and 1 pair of wellingtons.
1 pair slippers or plimsolls.

With the addition of handkerchiefs, these lists might serve as a minimum standard.

CHAPTER III

LIVING BELOW STANDARD (2)

(a) *Lice*

INFESTED hair among evacuated children was one of the main sources of complaint from their hosts. Head lice¹ are flat, grey-white insects, which inject an irritating substance when they bite. They lay whitish eggs, cemented to the hair near the roots, and known as nits. The empty shells cling to the hair after hatching. Lice are often called head fleas by euphemism, but they are actually the only insect which infests the hair. They do not infest premises but are passed from person to person. The irritation leads to disturbance of sleep, and lowers the health by septic absorption. The injuries to the skin resulting from bites and scratchings open the way for impetigo, ulceration, boils, eczema and adenitis. The louse is a carrier of typhus, trench fever and relapsing fever. The skin of some people is peculiarly attractive to lice, and the superstition that they "breed lice" dies hard.

Cases of infestation were not only numerous, particularly amongst the girls, but sometimes distressingly severe. A Town Clerk describes how, as the children defiled on arrival, the heads of some of them could be seen crawling with vermin. The School Medical Officer for East Suffolk remarks :

"Some of the heads were in a terrible condition, and an experienced school nurse told me that she had never seen such heads in this area since 1920."

This is a very significant statement. Some 23 per cent. of the evacuees in this area were found verminous. The Medical Officer concerned estimates that the percentage for his own school children was as high as 16 per cent. in 1920, but in 1938 it stood at 2 per cent. only. Infestation can be mastered.

Verminous heads were not always found on dirty children, some having picked up lice on the journey. In the great majority of cases cleansing was done either by the school medical service or else by patient hostesses. It was with chagrin that the cleansers found many of their patients reinfested after every visit from relatives and friends, thus discovering for themselves the bane of the town school nurse—that the source of infection is mainly in the home, and that the same children are found with lice time after time throughout their school life, being constantly reinfested by members of their own families.

¹ See *The Louse and How to Deal with It*, Ministry of Health Memo. 230 Med., 1940

Some of the mothers and young children evacuated were said to be heavily infested.

A report on children evacuated from the slums of Manchester, Grimsby and Hull states that "the garments they wore often had to be burnt as they were verminous", and the clothing of children of the poorest type was not uncommonly described as "dirty and verminous". It is not clear whether the vermin referred to was body lice or fleas; but it was presumably the latter as body lice are now rarely found. There was little mention of fleas, although some children were said to be severely flea-bitten. Fleas are not mentioned in the reports of the school medical service and are presumably not regarded in this country as a pest which is dangerous. Their numbers have, it seems, declined unaccountably in recent years.

THE PROBLEM OF STATISTICAL PRESENTATION

By close study of "The Health of the School Child," coupled with School Medical Officers' reports, statistics can be compiled which, had they been available to the public, might have prepared it in some degree for the prevalence of lousiness among the townspeople. An important aspect of the battle against lousiness is, however, the plain disclosure of the facts to the public. School Medical Officers give their main statistics in tables prescribed by the Board of Education, and it must frankly be said that these are not in a form to bring home the facts even to the small public reading these reports. The many different and confusing ways in which further information is conveyed in local reports beset the student's task with pitfalls. The Board's own annual report, "The Health of the School Child", also leaves much to be desired.

It is the duty of the school medical service to carry out annually the "Routine Medical Inspection" of certain groups of children, including entrants, in every school. The doctor's visits are pre-announced, with the object of inviting parents to attend, and it has long been recognised that this fact vitiates the practice of deriving from such inspection any statistics relating to conditions such as dirtiness and vermin, which can be removed by a preliminary clean-up. A true ascertainment of such defects can be obtained only from the unannounced visits of the school nurses, who should examine every child in the elementary schools for cleanliness once a term.

The Board of Education make use of the unhappy expression "Uncleanliness" to include infestation with head or body lice and mere dirtiness. As long ago as 1931 "The Health of the School

Child " recognised that the statistics for "Uncleanliness" based on routine medical inspection are valueless, and in that year quoted the following figures from Farnworth, Lancashire, to illustrate the point:

	No. of Children examined.	Found verminous.	No. of Girls examined.	Found verminous.
School Medical Officer's routine inspections	1,230	4.7 %	593	9.2 %
School Nurses' inspections	3,916	14.0 %	1,929	22.5 %

Nevertheless, the use by Local Authorities of an uncleanliness index based on routine medical inspections is still unhappily the rule, although it is patently not merely futile but dangerous. The proper cleanliness index is the ratio between the average attendance and the number of individual children found unclean by the nurses in the same year. The following further examples illustrate the contrast between this index and the one habitually used.

Children found unclean :

London, 1938 :

1. At routine medical inspections . . . 2.3 %
2. At nurses' examinations . . . 16.4 %

The annual report presents the picture as :

" Children free from uncleanliness . . . 97.7 % "

Liverpool, 1938 :

1. At routine medical inspections . . . 4.5 % boys, 13.1 % girls.
2. At nurses' examinations . . . 20.8 % all children.

Further details of the presentation of uncleanliness statistics relating to London schools are given in Appendix VIII.

INFESTATION OF SCHOOL CHILDREN

For a commentary in "The Health of the School Child" on the statistics relating to "Uncleanliness" the student must go back to 1933, when it was stated that improvement was steadily maintained. This was supported by a quotation from the report for London, giving the percentage of children found free from head lice and nits at the routine medical inspections. Here the matter rested on a note of confidence and optimism until the disclosures of evacuation supervened.

In February 1941, when the authors of this book had somewhat laboriously studied the data and felt their way towards the conclusion that a grave condition prevailed which had been much minimised by bad statistical presentation, a flood of light was thrown upon the subject by the publication of Dr. Kenneth Mellanby's

paper, "The Incidence of Head Lice in England". Dr. Mellanby was led by his observation of children admitted to hospitals, mainly for infectious diseases, to believe that the rate of verminous infestation was far higher than that shown by the reports of the Medical Officers for the schools from which they came. The Board of Education therefore paid the expenses of an enquiry in ten industrial cities (including six with a population of over 400,000) and rural areas in four southern counties. The sample is not entirely representative of the population of the area served as it contains a more than average proportion of young children from poor and overcrowded homes. Dr. Mellanby considers, however, that in view of the relatively small size of the more prosperous classes in a city, his results are accurate to the extent of some 80 per cent. He observes that ascertainment in hospital is particularly thorough, patients being disinfested lest they be said to have picked up vermin there.

INFESTATION WITH HEAD LICE IN TEN INDUSTRIAL CITIES.

A. Males.					D. Females.				C. Both Sexes.
Age.	Total No.	% Infested.		Total % Males infested.	Total No.	% Infested.		Total % Females infested.	% Males and Females infested.
		Nits.	Lice.			Nits.	Lice.		
Under 1	1,876	5.9	5.1	11.0	1,425	6.4	5.9	12.3	11.6
1	2,229	17.7	17.9	35.6	1,981	19.9	19.5	39.4	37.4
2	2,126	22.3	22.3	44.6	1,928	22.2	27.2	49.5	46.9
3	2,035	20.9	21.5	42.5	2,027	23.8	27.2	51.0	46.9
4	1,890	20.8	18.7	39.6	1,890	23.1	26.6	49.7	44.7
5	2,103	18.2	16.6	34.9	2,161	24.8	26.5	51.3	43.1
6	1,681	16.6	17.5	34.2	1,768	22.4	24.4	46.8	40.6
7	1,326	13.0	16.5	29.6	1,521	22.7	27.4	50.2	40.6
8	1,156	14.5	16.2	30.8	1,328	20.6	29.5	50.1	41.1
9	934	16.7	13.2	29.9	1,087	22.4	27.9	50.3	40.8
10	865	12.9	13.5	26.5	1,035	21.6	30.0	51.6	40.2
11	769	9.7	14.2	23.9	850	20.5	30.7	51.2	38.2
12	630	13.3	15.4	28.7	716	19.2	29.7	48.9	39.4
13	546	8.2	13.2	21.4	574	17.1	27.6	44.7	33.1
14	412	9.4	9.9	19.4	453	14.5	25.8	40.4	30.4
15	369	7.6	7.3	14.9	422	11.1	25.4	36.5	26.4
16	222	3.6	3.6	7.2	325	8.7	17.8	26.5	18.6
17	220	2.2	4.5	6.8	410	7.8	10.7	18.5	14.4
18	234	0.8	0.8	1.6	418	3.3	6.3	9.6	6.7
19-20	455	0.6	0.9	1.5	731	5.7	5.6	11.3	7.6
21-30	1,375	0.9	0.6	1.5	2,226	3.4	5.2	8.6	5.8
31-40	655	0.8	1.8	1.8	1,095	4.4	3.9	8.3	6.0
41-50	377	1.0	0.9	1.9	460	3.4	4.4	7.8	5.1
51-60	382	—	0.3	0.3	341	3.2	2.6	5.8	2.9
61-70	274	0.4	0.7	1.1	231	3.0	4.0	7.0	3.8
70 up	146	—	0.7	0.7	133	2.2	2.2	4.5	2.5

The main results of the investigation are given in the foregoing important table, which is a slight adaptation of Dr. Mellanby's own.

These figures show an infestation rate of 30 per cent. amongst the boys of school age (5 to 13 years inclusive) and 50 per cent. amongst girls of school age. They were, on an average, three times as high as the figures shown in the relevant School Medical Officers' reports. Dr. Mellanby says :

"It is therefore apparent that in those cities which I have found to be so very verminous the majority of infested children are undetected. When one realises that at routine examinations in large schools less than one minute may be devoted to each child, this is not surprising."

He concludes :

- (a) That a very high degree of infestation with head lice exists in the industrial cities.
- (b) That girls are more frequently infested than boys.
- (c) That the highest rate of infestation is found among the pre-school age children. This is a new finding of great importance.
- (d) That whereas the infestation among boys decreases steadily from about 3 years, when over 40 per cent. are verminous, until the infestation among young adult males is very low, in girls there is practically no decrease before the age of 13, and even the older girls over 13 show a considerable degree of lousiness.

He adds that, although the cities showed considerable differences, the ratio between the degree of infestation in the various age-groups was constant. Both were always most affected at the age of 2-4 years, while girls remained heavily infested until over 13 years old.

"Considering the girls aged 9-13, the most heavily infested city showed 62 per cent. verminous and the cleanest 36 per cent. In five out of ten industrial cities over 50 per cent. of the girls aged 9-13 were verminous, and in the remaining five, less than 50 per cent. (though always more than 36 per cent.) of the girls were lousy."

Dr. Mellanby recognises no real distinction between cases showing nits and those with live vermin.

The enquiry in the rural areas supported the figures given by School Medical Officers and showed that in a sample of about 2,500 cases the highest figure for any group was one of less than 10 per cent. relating to girls of 3-8 years of age. Children under 1 year showed no infestation, infestation of boys disappeared from the age of 13 years and no infestation was found in either sex after the age of 18 years.

Further observations are :

i. That the hospital records show no increase in infestation during August and September, and the suggestion that the high prevalence of infestation among the evacuated children was due to evacuation taking place at the end of the holidays is not borne out. Infested children may, however, reach an acute condition during the holidays.

ii. That up to 50 per cent. of the evacuees admitted to infectious diseases hospitals in the reception areas were verminous.

iii. That the countryside managed to cleanse the children who settled there and avoid a permanent rise in the local infestation rate.

Dr. Mellanby's conclusion is that the school medical service has succeeded in dealing with head lice in the country but has failed in the town. In the country, public opinion has been brought to regard infestation as a disgrace ; in the town it is often treated lightly. Co-operation by the teachers and even the heads of schools is by no means always satisfactory, and inspection by doctors and nurses, which is in many cities at once frequent and superficial, defeats its own ends. The best efforts of the school medical service would, moreover, be defeated by the existence of a reservoir of infestation in the pre-school child.

Dr. Mellanby believes that the louse will only be eradicated by educating the older children to keep both themselves and the pre-school children in their homes clean, while the school medical service concentrates its forces upon the younger school child.

" Before further education of this kind is possible, it would be necessary for school teachers to learn considerably more than they do at present about the head louse. There should be no difficulty in including more detailed information and practical demonstrations in the curriculum of training colleges. I have found training college staff and students always very willing to co-operate in this matter."

He remarks on the disastrous effect of the permanent wave in discouraging combing, and observes that even little girls under 10 years of age, in the poorest families, may be given such waves and actively dissuaded from combing their hair afterwards, so that they become acutely verminous. Having noted a letter in *The Times* with the well-known signature of " Permanently yours ", Dr. Mellanby in the same journal, on May 6, 1942, acknowledges that it is not the permanent wave, which curls better if well brushed, but the setting of curls which girls are afraid to comb out.

Dr. Mellanby recommends that legal provision should be made for the cleansing of the pre-school child ; that publicity should be

given to the subject of the head louse and public opinion educated by incessant propaganda to regard lice as a disgrace ; and that the use of the term "uncleanliness" to denote lousiness should be discontinued.

The Ministry of Health and Board of Education issued a circular¹ to Local Education and other Local Authorities giving the results of Dr. Mellanby's enquiry and inviting them to institute an active campaign against the head louse and to report on the action taken.

An interesting note on ascertainment by Miss Cooper Hodgson, former Superintendent Health Visitor for Durham, is given in Appendix IX. She also points out that nits, firmly cemented to the hair, pass between the teeth of an ordinary nit-comb and can only be effectively removed by a square-toothed steel nit-comb costing 2s. to 2s. 6d., which is too expensive for the poorest. All the evidence goes to show that infestation with body lice is now rare.

School Medical Officers have stressed the importance to their service of the personal influence of head teachers and school nurses. It might be added that the importance of choosing School Medical Officers with a genuine interest in the social side of their work seems to the layman so very great as to suggest that training in social medicine should be given by medical schools.

THE UNDER FIVES

The school medical service does not touch the "under fives" except where they have been admitted to nursery or infants' schools or classes, and these children, freely nursed by elder brothers and sisters and often sleeping with them, are now discovered to be very liable to suffer from acute infestation by head lice at an age when the skin is tender and its effects must be most injurious to health, and to constitute a dangerous reservoir of infection. The infestation figure for boys and girls alike shown in the above table approaches 50 per cent. at the ages of 2, 3 and 4, and in the case of boys is far heavier than at any other age. This is a truly appalling discovery, lending fresh and urgent importance to the expansion of available school accommodation, so as to enable all mothers to bring children of these dangerous ages within the ambit of the school medical service.

The Maternity and Child Welfare Service is charged with the care of children up to 5 years, and the duties of the Health Visitor include advice to the mother on the health and welfare of the pre-school child. She is unable adequately to perform this duty owing to the restriction of the time allowed her for home visiting.

¹ No. 2306, Ministry of Health ; No. 1544, Board of Education, 1941.

THE POST-SCHOOL CHILD AND YOUNG PERSON

The only source of information about the cleanliness of boys and girls between the ages of 14 and 18 before the war came from the reports of some Local Education Authorities which made use of the powers given them in 1936 to inspect medically the boys and girls attending Junior Instruction Centres. These Centres catered for youngsters in the larger towns who had either had no employment since leaving school or had become unemployed. They were naturally an unfavourable sample of their age-group, and all investigations showed them to be on the average poorer, dirtier, less disciplined and less intelligent than the normal elementary school child, even in the poorer quarters of the towns. The reports on medical inspections at Liverpool and Newcastle-on-Tyne, for instance, make dismal reading. These Centres¹ demonstrated how miserable a creature the school leaver might be, or might rapidly become, the extent to which, at the lower levels, he was evidence of failure in the educational and school medical services, and the grave folly of letting these failures disappear into the community without further effort.

Clearly children must never in the future be allowed to reach the age of 14 years in such a deplorable state; they must be sent out into the world with a civilised standard of personal cleanliness. The Centres should be replaced by Day Continuation Schools, directly administered by the Education Authorities for the use of young people both employed and unemployed, and sharing the full benefits of the school medical service.

The poorest type of school leaver generally goes into the poorest type of employment. It is hoped that the future will see provision made for the medical and nursing care of young persons in industry.

INFESTATION AMONGST ADULTS

Dr. Mellanby's table shows that one in nine of the young women aged 18 to 20, and one in thirteen of the older women in hospital were infested with head lice. It is not possible to gauge the significance of these figures without knowing how adult hospital cases are selected, but they apparently show that many mothers are liable to infest their infants with lice.² The establishment of nursery schools educating parents as well as pupils is perhaps the best hope of inducing cleanliness in adults—see the account of the reclamation of the poorest class of the people of Vienna, supplied by Miss Denby in Appendix X.

¹ See *Redeeming the Time*, by Owen E. Evans (Liverpool University Press), 1941.

² Whereas infestation in children reflects maternal neglect, there is evidence that in adults it is strongly associated with inferior intelligence.

It is strongly urged that all Local Authorities should examine the adequacy of the time allowed to both Health Visitors and school nurses for home visits. Special visiting campaigns might well be planned in suitable localities.

The number of old people included in Dr. Mellanby's table is small and they do not show a high degree of infestation. It is, however, well known that some aged people, especially those living alone, fall into a condition of self-neglect, when they become acutely dirty and verminous in their persons and insanitary in their dwellings. All dirty and verminous persons are a danger to the community, and a special study might be made of this difficult subject. Measures which suggest themselves are the strengthening of the Sanitary Inspectorates, especially as regards women staff, who can most appropriately deal with such cases (since there is a very great preponderance of women amongst the solitary aged); and that Local Authorities should be given powers to appoint home helps¹ to assist the aged, and nursing orderlies to help them to maintain personal cleanliness. The powers of Sanitary Authorities to require the cleansing of adults should be reviewed. Far more aged persons should be provided for in homes which are not institutions.

CONCLUSION

Although lice produce a condition of the skin which is classed as a skin disease, verminous infestation is not an ailment. It is, in the ordinary circumstances of civil life, simply a form of dirtiness. Thousands of working-class mothers keep themselves and their families free from it as a matter of self-respect, but in the conditions of poverty this is achieved at the cost of unremitting vigilance and toil. The young, the old and the careless fail to wage the necessary war and become reservoirs of infection for the rest of the community. Even acute infestation can, however, be rapidly cured, and school doctors and nurses would by now have made better headway against head lice were it not that lice are a "family complaint". The child who comes from the vermin-ridden family has no sense of shame in vermin—they are "natural" and "our Mother says so". The child is cleansed, she goes home and nurses a toddler, sleeps with a sister who has left school, helps granny or uses the family comb, and all's to do again!

It is true that the bad natural lighting of some houses makes it difficult for mothers to detect vermin, but this is hardly a factor of

¹ At present these can be appointed only under the Maternity and Child Welfare Act.

importance in the problem. The trouble is that the school medical service is confronted with families to whom the matter is one of indifference, and will remain so unless they suffer a change of heart. The service may even, as Dr. Mellanby suggests, be defeating its own ends by enabling parents to shelter behind a series of false "clean bills" resulting from inadequate examination, and to rely upon such vermin as are discovered being removed without their personal effort. The task to be performed is, therefore, a complex one: to improve the standard of ascertainment by the school medical service; to make cleanliness as easy as possible to achieve; and to induce in the heretofore indifferent an incentive to cleanliness, a conviction either that vermin in the family is shameful, or, failing this, that it will be a source of endless and inescapable *personal* trouble and inconvenience to them until it has been eradicated.

Dr. Mellanby justly says that the time has come for a great advance in the attitude of the public towards head lice. Parents and children themselves must be educated out of believing that lice are spontaneously generated, or a sign of strength in the infested person, or are healthy, or are natural to children, or are bred by soap, or can be justified because some other member of the family has them, all excuses which are now heard. From many sources it is reported that the woman who, when invited to cleanse her child's head, declares that she is being persecuted, often finds support in unexpected quarters including school managers and local politicians who take up the attitude of "What a fuss about a few nits!" or, still worse, declare her to be well known to them as particularly cleanly. Mr. Stuart Bunning has spoken as a magistrate of long experience of the need to educate local authorities as well as parents and children.¹ The debates in the House of Commons on the subject were marked by some bitter protests that the working class was being insulted, an emotional attitude which produces the curious result of condemning all that is best in the working class to go on suffering from all that is worst. Freedom from vermin is a matter of will-power and social standard, and it is time that eighteenth century tolerance was put behind us and a more modern attitude adopted towards this dangerous and loathsome pest.

RECOMMENDATIONS

(1) An interdepartmental committee of the Ministry of Health and Board of Education should be set up at the earliest possible moment

¹ *Transactions of the Royal Society of Tropical Medicine and Hygiene*, vol. xxxiii, No. 4, p. 387.

to consider the question of verminous infestation in all its aspects. It should consider, *inter alia*, the methods of ascertainment, notation and control of infestation in schools; the medical supervision of young persons; the hygiene of the pre-school child; the control of vermin in adults and the aged; the control of personal cleanliness in factories; methods of curative treatment and the control of possible sources of infection, such as the second-hand clothing trade, hairdressing establishments and commercial holiday camps.

(2) Pending the publication of findings by such a committee, the Board of Education should call for an "infestation index" to be given in the Annual Report of all School Medical Officers based upon the results of unannounced examination by the nurses and giving the percentage of average school attendance found with nits or lice (without distinction), for boys and girls separately, the figures for previous years to be carried forward until they can be given regularly for five years.

(3) The schools of every authority should be divided into three groups—good, intermediate and poor, according to the general standard of cleanliness of the pupils, and annual reports should state the number of times all children in attendance have been examined by nurses as a matter of routine, followed by a detailed analysis of the conditions in particularly difficult schools and districts.

(4) The Board of Education should report in detail on the black spots.

(5) A square-toothed steel nit-comb should be put on the market at a price within the reach of all.

(6) The Home Office should address a firmly worded circular to magistrates on the treatment of neglectful parents brought before them.

(7) The Central Council for Health Education should be invited to undertake a campaign for the education of public opinion and the enlistment of all possible forces in a crusade for the eradication of personal parasites.

(b) *Skin Diseases—Scabies, Impetigo, Ringworm and Others*

The authors cannot profess to deal with this subject except as laymen. They have taken no evidence upon it, but have confined themselves to the facts given in official reports. The Ministry of Health's pamphlets¹ and Macleod's *Diseases of the Skin*² have been used as works of reference on the medical side.

¹ *Scabies*, Memo. 229 Med. *The Louse and How to Deal with It*, Memo. 230 Med., 1940.

² (West), London, 1939.

The complaints against the evacuees included many about skin diseases, and cases occurred of the infection of native children in the reception areas, although there were also cases of evacuees infected in their billets. The subject is consistently mentioned by the Medical Officers for schools in receiving areas and a Parliamentary Question (Hansard, January 23, 1991, col. 303, No. 57) disclosed that a borough where scabies was previously unknown had had 150 cases since receiving evacuees.

Dr. Alison Glover states (*op. cit.*) :

" *Scabies* has been on the increase in many evacuation areas for the past three or four years, but on the whole the incidence reported from the reception areas was less than had been anticipated.

" *Impetigo*, on the other hand, caused more trouble than was anticipated and, in the early days of evacuation, came only third to pediculosis and enuresis as a cause of trouble."

The School Medical Officer, Essex, speaking of the evacuated children, says :

" Large numbers have been treated for *impetigo*, and this condition has been very persistent in some cases, probably due to a poor state of health. A large number of scabies cases have also been treated at the various clinics and most have had to be removed to a special hospital for treatment."

Dr. Ferguson of Surrey and others say that both scabies and *impetigo* were more prevalent amongst evacuees than amongst children in the reception areas.

At Northampton the school population was doubled by the reception of 10,326 school children from London. The School Medical Officer states :

" The evacuees had only been a very short time in Northampton before large numbers were found to be suffering from skin diseases, scabies, *impetigo* and verminous to a degree, while the complaints received from householders who had bed-wetters (and worse) billeted upon them ran into hundreds. It was found necessary to take three large houses, in which to billet cases of skin diseases and the worst of the bed-wetters. In addition, another large house was taken in which to accommodate children of bad character.

" The ordinary clinic work was carried on at full pressure, and was confined almost entirely to evacuee children—the type of case seemed more severe than we ordinarily meet in this town, severe boils and extensive *impetiginous* conditions and as many minor accidents in a month as usually occur in an ordinary year ; the children seemed to be in trouble all round.

" Scabies cases soon became prominent and were of a recurrent type, having been under treatment before evacuation. It was found that these cases in many instances could not be dealt with in the billets. . . ."

The Northampton clinics served the evacuees for four months. During that period they treated ringworm, impetigo and scabies cases in numbers twice the normal for the local children, and other skin diseases in six times the numbers.

The commonest skin diseases are closely interlinked with one another and with the presence of vermin; they are fostered by overcrowding.

Scabies or "the Itch" has now almost achieved respectability under the name of "Shelter Rash". This regrettable euphemism gives it an air of mere misfortune, whereas it is actually one of the diseases of dirt. It is caused by a mite which burrows under the skin, causing great irritation, especially at night, when it disturbs the sufferer's rest. The injured skin gives entry to other infections such as impetigo, eczema and boils. Scabies is transmitted by physical contact and is a family disease; children who have been cured are constantly reinfected in their homes.

Scabies was increasing before the war; in Birmingham and Middlesbrough the number of cases treated by the school medical service was trebled in the four years 1935-8; in London and Newcastle it was more than doubled. Its prevalence has caused the Ministry of Health to make an Order under the Emergency Powers Act and issued to Local Authorities with Circular 2517 on November 14, 1941, giving them power, where they are satisfied that scabies, or any other disease associated with verminous conditions, is so prevalent as to endanger the war effort, to cleanse the persons concerned and deal with the premises in which they have been living and the persons in them. This is a welcome step towards better control of the family diseases of dirt.

It is not certain that scabies is transmitted by textiles, but general considerations of hygiene suggest that the Public Health Acts should be amended to enforce the sterilisation of used clothing and bed-clothes before resale.

Impetigo is a highly contagious disease caused by a streptococcus which enters the skin through injuries due to cuts, louse bites, the burrows of the scabies mite, shingles, and most frequently the scratches made by attempts to relieve irritation. It is especially common in infancy and early childhood owing to the delicacy of the skin. It is frequently associated with lice. Contagion occurs by contact or through infected towels, linen, etc. While it occurs in all classes and is known in boys' public schools as "scrum-pox", it is much encouraged by overcrowding and insanitary surroundings. It is associated with poverty, dirt, wrong feeding and neglect.

The lack of a handkerchief may, for example, cause a child's skin to become tender and broken around the nostrils, thus admitting the infection.

The reports of School Medical Officers show that before the war impetigo was common amongst elementary school children in the big towns and was not decreasing.

In the case of both scabies and impetigo, School Medical Officers' reports show heavy incidence in the big towns, an intermediate position in the industrial counties, and a very low incidence in the rural counties. East Suffolk, where the Medical Officer's reports show the true crusading spirit, has practically eliminated these complaints in a school population of about 20,000.

The prevalence of skin diseases in the poorer schools points to the need for a scrupulous standard of school hygiene. Overcrowding in cloakrooms and classrooms is alike dangerous, and every child ought to have its own towel and handkerchief.

Ringworm of the scalp, once the scourge of the elementary schools, has been conquered owing to the discovery of treatment by X-rays. No city now has more than a few hundred cases treated each year.

The Board of Education's tables lump together as "Other skin diseases" all those not mentioned above; the figures for the cities up to 1938 were heavy and obstinate. Many of these complaints are interconnected and their incidence is intimately bound up with questions of general health and hygiene. According to Macleod, infantile eczema is generally caused by the chafing of wet and soiled napkins or the imperfect cleansing of the anus from excreta; inflammation is caused in infants by the wearing of wet napkins; boils are caused by irritation or friction, and may result from the presence of lice or scabies. The figures for "Other skin diseases" show no decline; they are high in town¹ and low in the country.

Taking all skin diseases, exclusive of lousiness, together, "The Health of the School Child" in 1938 remarks an increase in ascertainment at routine medical inspections from 9.4 per 1,000 examinations in 1936 to 9.7 in 1937 and 10.5 in 1938. The use of national averages based on this form of inspection hides rather than discloses the heavy amount of skin disease amongst elementary school children in the cities. In 1937 Sheffield treated over 14,500 cases of skin disease in a school population of 55,000, Birmingham nearly 11,000

¹ Newcastle-on-Tyne has treated so large a number of cases of skin disease, both specified and "Other," in its school treatment centres that some special explanation seems called for. London's figures are regrettably incomplete owing to the use of centres run by voluntary bodies.

in 118,000, Hull nearly 7,000 in 42,000. The numbers in the poorest schools must clearly, therefore, be very high and the black spots ought to be statistically limelighted. The analytical presentation of the statistics should receive urgent attention.

The common skin diseases, accounting as they do for much enforced absence from school, with consequent loss of education, waste of public money and expenditure on treatment, should be the subject of detailed study and conference amongst School Medical Officers under the guidance of the Board of Education and Ministry of Health.

The incidence of skin disease is one of the surest indices of the standard of general health and hygiene in a community. Macleod¹ says :

" Everything which tends to influence the general health has an indirect bearing on the skin diseases.

" A large number of skin affections are associated with overcrowding and defective and imperfect sanitary conditions, and are to be found in their most acute forms among the poor. . . . In the case of children of the hospital class it may be impossible to obtain a cure so long as they are at home, neglected, dirty and improperly and insufficiently fed, while improvement is almost immediate when they are transferred to the skilled care, proper food, light and ventilation of a hospital ward."

Most of the skin diseases can be attacked preventively through everything which makes for general well-being—better nutrition, recreation, hygiene of the person and clothing, exercise, light and air, as well as by careful ascertainment and treatment by the school medical service. If Dorset can show only fourteen cases of skin disease in a year among 14,340 children attending school, and East Suffolk only one case amongst 17,822, it means that skin diseases can be eradicated and that no less than this should be the national goal.

An interesting account of the medical condition of a school population in Aylesham, Kent, gathered from various parts of the country by the opening of coal mines, is given in Appendix XI.

RECOMMENDATIONS

1. The Board of Education and Ministry of Health should consider setting up a School Medical Research Branch and inviting the great Trusts to endow research by means of grants and scholarships devoted specifically to this subject.

2. As many skin diseases are family complaints, there should be

¹ *op. cit.*

a nation-wide development of health centres to which all members of a family can go for advice and treatment.¹ The study of family health should constitute an important subject in the reorganisation of the medical services.

3. The importance of home visiting by Health Visitors should be stressed and they should be instructed to give close attention to the general health, including skin condition, of mothers, infants and young children.

(c) *Insanitary Habits*

The extent to which a nation habitually modest and inclined even to prudery was startled out of its reserve by the sanitary habits of some of the evacuees was astounding. No aspect of evacuation produced greater scandal and none suggested more squalid aspects in the home life of some of our town population. Facts which have been locked in the bosoms of a few people without illusions—Relieving Officers, Housing Managers and the like, became public property, and habits they could hardly have described without being accused of defamation and pornography became public property and were unsparingly reported to the Mother of Parliaments. This is a subject wholly neglected in studies of contemporary social conditions.

The chief accusations levelled against the children were that large numbers wetted their beds, that some wetted their clothes and were unused to change them afterwards, and that some few, particularly boys, deliberately spoiled curtains, furniture, etc. These complaints related surprisingly to children of all ages up to fifteen years. Some of the younger ones were said to be wholly unaccustomed to use a closet and to have used the hearth or corners of the room for defecation. Some, particularly a surprising number of the younger boys, soiled clothing and beds through faecal incontinence, or soiled their clothes through not using toilet paper.

As regards the evacuated mothers, reports came from every reception area that in some cases bedrooms and beds occupied by them with their young children were reduced to a foul condition, especially where the mothers drank to excess, and that they accepted insanitary habits in children up to and over five years as a matter of course, resenting any criticism.

¹ Since this was written the Interim Report of the Medical Planning Committee of the B.M.A. has appeared, proposing the re-organisation of the medical services upon a basis of health centres.

The word enuresis, which has, since evacuation, been heard so often, means failure to control urination either by day or night and is not synonymous with bed-wetting. It would not be used in respect of children under three years of age, although most children can be trained to keep dry by the age of two.

The psychiatrist states that bed-wetting may result from a sense of insecurity, and that for a small child to lose the consciousness of stability and protection arising from the presence of his habitual guardians and teachers may cause forgetfulness of carefully inculcated training and reversion to the double incontinence of babyhood. It is impossible to say what proportion of the cases complained of were due to this factor, aggravated, no doubt, by the fact that children were in some cases billeted with people who added to their difficulties by lack of proper care and sympathy. Some other cases were due to children being used only to water-borne sanitation and afraid to go out-of-doors in the silent dark of the countryside.

There were, however, a substantial number of other cases of a more difficult type, and of these only a very few appear to have any detectable medical origin. School Medical Officers, for example, say :

"Enuresis is probably far more common in children than we suspect. . . . Enuresis was not confined to those from bad homes. In large numbers the apparent cause of the condition was laziness or bad training. . . . Our problem has been much eased by the return to London of the worst cases of the slothful or untrained type." (Surrey.)

"One of the most troublesome conditions among the evacuated children has been incontinence and enuresis; and it has been surprising to note that even considerable numbers of the elder children have been affected. . . . Although in some cases the condition appears to be due to weakness, in many cases I am convinced it is due to lack of early training. Complaints have also been received of lack of cleanly habits during the day in the billets." (Essex.)

"We found that the condition (enuresis) was not confined to young children but that quite a number of cases occurred in girls and boys of fourteen or fifteen and these reacted readily to stern warnings and explanations." (Northampton City.)

Dr. Gill, of the Guardianship Society, Brighton,¹ found enuresis in evacuated children of all ages from five to fifteen. He calculates that it may have affected from 4-5 per cent. of the 14,000 children evacuated from London and Croydon to Brighton.

¹ "Nocturnal Enuresis," by Samuel Gill, M.D., D.Ph., *British Medical Journal*, September 10, 1940.

(i) *Medical Cases*

Enuresis is one of the symptoms of cystitis (inflammation of the bladder). Various investigators suggest that it may also be due to worms, or to an obstruction requiring to be dealt with by circumcision (although this is disputed) and a number of other causes, and that it is often associated with cleft spine,¹ but it is evident that much uncertainty prevails as to pathological origin, both direct and indirect. The writers were told of a boy who had been medically certified as without bowel or bladder control, but who was cured by training.

(ii) *Purposive Incontinence*

There were some evacuated children, by no means always from poor homes, who were guilty of deliberate wetting and soiling, both by day and night, either in order to be sent home, or as a protest against accommodation which they disliked (sometimes as too grand), or persons who mismanaged them ("It made her mad," said twins of six; "she hated us!"), or in order to attract attention, or from sheer naughtiness and destructiveness. These are for the psychiatrist; they form no part of the special problem of town life, except inasmuch as the choice of this particular means of self-expression may indicate an unsatisfactory background in the home.

(iii) *Faulty Habit*

In order to investigate the connection between enuresis and the home conditions and educational standard of the children concerned, Dr. Gill, of the Guardianship Society, Brighton, had the homes of 97 enuretic children,² who were billeted under his care, visited by one of the London County Council's Care Committee staff, who sought replies to a questionnaire. The answers were not complete under all heads, but interesting facts emerged about the children and their families.

The enuretic children's ages ranged up to fourteen or more. Educationally, four out of ten were below average and one out of ten above average; the great majority were legitimate and came from normally constituted family groups; two-thirds were the children of parents of poor social status and one-half of parents of poor financial status; two-thirds had fathers in regular work and

¹ R. C. Browne and A. Ford-Smith, *British Medical Journal*, December 6, 1941.

² Dr. Gill's society normally deals with mental defectives, but it appears that the enuretics referred to it were not selected as of low mentality, but simply as enuretic.

one-third had mothers who went out to work regularly. Housing conditions do not seem to have been adverse ; in five cases out of every six the parents occupied a whole house or flat and only one child in six came from a tenement dwelling. Overcrowding was not marked, 26 out of 47 families having three bedrooms. In 40 out of 49 cases questioned on this point the children had access to indoor closets at home, and the presumption is that the majority of these were private.

Dr. Gill concludes, although with reserve, that housing conditions with their possible obstacles to the early training of children have no apparent connection with enuresis, and that it is only in part a problem of poverty and low social status in the parents or of limited intelligence in the child. The factor which he considers as common to all cases is a low *social standard*, probably inherited, in the parents, leading to lack of training. He satisfied himself that, in spite of parents' denials, it was only in rare cases that the habit had been started since evacuation.

" A large number of children have told me that they did the same thing at home and the majority added that their parents did not seem to bother about it. This tends to show that it is a social bad habit which can be overcome if there is any strong incentive for them to be clean."

Dr. Gill observes that these children felt no shame about incontinence and tolerated the discomfort of wet and dirty conditions against which children from better class families would protest. (Miss Cecil Leslie¹ points out that all infants protest if wet and dirty, but that the protests cease after a time if unheeded ; the resistance is, in fact, destroyed.) In some cases the parents not only appeared indifferent to their children's faulty habits, but resented the protests of foster-parents and took their children home. A well-to-do mother excused the misdoings, both nocturnal and diurnal, of children aged 11, 8 and 6½ (including soiling by the boy of 11) by saying before the children, " Poor little things, they're only babies after all ! " Dr. Gill suspects that such parents may themselves have had faulty habits until a late age.

He concludes that there is a deplorably low standard of cleanliness and social behaviour in a considerable number of families living in overcrowded districts in London and Croydon, but not necessarily in overcrowded houses or tenements.

" In all probability the great majority of enuretics tend to be spontaneously cured with increasing age, though it is possible that it is much

¹ Red Cross Commandant in charge of Highfield Sick Bay, West Byfleet, Surrey.

more common among adults than is generally known. . . . In my opinion 'incentive' is the most important factor in effecting a cure. If the child sees no reason why he should be clean, in view of his parents' attitude, no amount of psychoanalysis or suggestion is likely to improve him. These methods may, however, be useful with children from good, clean families."

Dr. Gill adds that the foster-parents of his Society had little success in curing the enuretics.

Witnesses pointed out to the authors that the mother of the enuretic and the soiler does not teach her child either regular habits or control of its natural functions, so that it regards any waiting as a hardship. Miss Leslie adds that failure to give sanitary training to their children is only one aspect of a general lack of will-power, order and discipline in the lives of some families, other manifestations of which are lazy feeding habits, late nights and late rising, uncontrolled temper, uncontrolled sexual impulse and failure to exercise moral or physical control over children.

Enuresis is a relatively small but ever-present and embarrassing problem in the army and navy,¹ Poor Law Homes² and Home Office Approved Schools (in both of the latter it appears to be particularly troublesome), in holiday camps, in the Ministry of Labour's Training Centres and in connection with the Ministry's industrial transference and overseas settlement schemes. A high official who had been concerned with the last-named described his experience as "One long wrestle with the shipping companies over spoilt berths". The destruction of property which it occasions may be serious, as a soaked overlay cannot be effectively cleansed and its cost is high. In the homes of the poor it produces a depth of squalor which must be seen to be believed. A bed is generally occupied by at least two or three children, one of whom may be enuretic. A bed occupied by a couple with a baby is often wetted nightly by the child. One of the authors remembers a family which had been rehoused and to whom a voluntary society had given two double beds. The family all slept in one room, the parents and baby in one bed and three children in the other. After three months the steel mesh of both beds was rotted through in a large central hole.

Yet, in spite of all this material damage, degradation and unhealthiness, enuresis, presenting as it does a complex of social,

¹ Dr. Gill was informed that about 1 per cent. of 17-year-old boys going to sea after four years in a residential training school are nocturnal enuretics.

² W. Sheldon, *Practitioner*, April, 1934. The Report of the School Medical Officer, Lancs., 1935, states that a sample of 5,000 children aged 5 to 15 in Poor Law Homes disclosed 5 per cent. as enuretic, three boys being affected for every two girls.

medical and psychological problems, does not appear to have been adequately studied or given the importance it deserves. Medical men sometimes show a tendency to dismiss it with impatience. Such study as is made is almost always confined to bed-wetting, which is merely one aspect of a wider question which ought to be tackled as a whole. Some School Medical Officers have written papers on the subject in its medical aspect reporting inconclusive experiments with various forms of treatment. The fact that it is a problem of certain social strata, owing, it seems, to inferior maternal care or standards, and that the lack of training in infancy is in some cases impossible to remedy later, has been insufficiently remarked and studied.

To turn to correspondents of the writers, who have dealt with children younger than those studied in schools and colonies, Miss Leslie writes :

"So far as my experience goes, children with dirty habits are usually mentally, physically or emotionally below normal, but what evidence I have makes me think that these habits and the wrong feeding, insufficient sleep and exhaustingly uncontrolled and irregular life they lead can only be permanently improved through education—better material circumstances only are certainly not enough.

"So far all the children who have come to us have yielded to regular hours, steadily maintained rules, adequate sleep and proper food, supplemented with cod liver oil, orange juice and a pint of milk daily."

Miss Maynard¹ writes a note given in full in Appendix XII. She also appears to have had a high degree of success—it is noticeable that both she and Miss Leslie write with a confidence on this point which we have not found elsewhere. She does not specifically mention dietary, but stresses the need to cure the whole child by means of a regular life, the encouragement of self-confidence and the fostering of a personal loyalty through which he can be made to exert his will. Both she and Miss Leslie approach the defect by education in the broadest sense—the building of body and mind by means of well-chosen food, abundant sleep, regular habits, gentle but firm discipline, and the appeal to reason and affection. This last is perhaps the most natural source of incentive in the child.

It is a singular fact that in the same family, eating the same food and subject to the same degree of maternal care or neglect, some children will train themselves so early as never to qualify as enuretics while others may carry that unhappy title for years and even for life

¹ Commandant in charge of Quedley Hospital, Shottermill, Haslemere.

The whole question of enuresis needs to be made the subject of authoritative research in which the child is studied not, as heretofore, in isolation, but in the family circle and from a very early age.

As regards faecal incontinence, available evidence shows it to be, except in drunkenness, a defect of small children, particularly boys. Like most enuresis, it appears to be the result of lack of training in infancy. Sphincter control is, however, easier to acquire than bladder control, and parents are presumably less tolerant of its absence, which must also become intolerable to the child so that he cures himself at an early age. It is surprising, however, to note that soiling both by day and night was found in some boys of as much as ten and eleven years and was attributed to mere laziness.¹

Dr. Ferguson's statement that the task of tackling incontinence was much lightened by the return of the worst cases to their homes is a reminder that, although some children have been cured during evacuation, the worst of the problem remains untouched.

As regards adult incontinence, Dr. Gill's suggestion that it is more common than would be supposed is unhappily borne out by other evidence, including the survey of evacuation carried out by the Women's Institutes. Drinking habits may produce or aggravate this extraordinarily unpleasant result, and the Health Visitor may have more reasons than one for saying that children should not sleep in their parents' bed. It is doubtful whether any steps can be taken to deal with this matter directly, but measures taken to build up the social standard of both parents and children will have their effect upon it.

SANITARY ARRANGEMENTS AND HABITS IN THE HOME AND ITS SURROUNDINGS

While enuresis cannot be considered a problem of bad housing, sanitary habits ought not to be examined without pointing out that the closet accommodation in a great deal of old property in this country is disgraceful. There are still privy middens in towns, houses with

¹ In a typical case a middle-class woman of great character and with boys of her own, received five children from two Bootle families into her house. Both families had used a pail as sanitary convenience in the home. She gave them chamber-pots at night and told them from the first that these should be used, but two proved to be persistent bed-wetters and sometimes all three beds occupied were wet. One of the boys, aged six, soiled his trousers at tea-time on the second day and seemed to regard this as natural. Soiling by day and night proved persistent in this child, and the mother, when seen, said that he paid no attention to her, and that the only thing to do was to put newspaper under him in bed, and into his trousers. A doctor who was consulted by the hostess said that the boy was merely lazy.

cesspool sanitation, and others with closets across waste ground which women are afraid to cross alone at night. Bad sanitary provision is almost always coupled with overcrowding, of which children are the particular victims. Hundreds of thousands of families in all parts of the country have not a private closet,¹ and there are areas where it is the exception for a family to have one. In Clerkenwell, for instance, extensive furnished sub-letting results in sometimes as many as 7, 8 or even more tenancies to one W.C. In North Battersea from 60 to 70 per cent. of closets are used by more than one family. In Shoreditch the numerous three-storey houses are said all to be tenements occupied by 3 families, sometimes sharing two closets, one at the top and one outside the basement; the yard closet may be 40 feet from the house. The outside closets are generally much less well kept than the inside ones and their condition is often bad. The present standard of sanitary inspection in the Borough ensures merely that every house shall be visited once in six years, and a Sanitary Inspector gave evidence that the majority of houses have outside W.C.'s only, which are used by 2 or 3 families. A published enquiry into the home circumstances of some 400 Shoreditch L.C.C. school children,² selected at random from six elementary schools in this Borough, the most overcrowded in London, showed that in 381 cases only the 93 who lived in flats and 11 others had an indoor closet, and in 206 cases out of 390 the closet was shared by a number of families ranging from 2 to 7. In 22 per cent. of cases the closet was shared by 3 or more households and in 5 per cent. by 4 or more. *Working-Class Wives*³ tells the same story, with flagrant examples. An L.C.C. by-law requires the provision of one W.C. for every 12 persons, but no information has been discovered as to the standards obtaining elsewhere. No guidance is given by the Ministry of Health's Model By-laws. There can be no doubt that the conditions described do much to lower general health by encouraging the town-dweller's curse of constipation, especially in girls.

The difficulties of mothers in training their children are obviously much increased by such conditions and they must often resort to expedients which are laborious and perhaps in themselves undesirable rather than allow children to use closets which are foul, ill-lighted or unlighted, often without a bolt and so placed as to produce a risk of molestation. Closets which are distant from the dwelling, either up or down many stairs or across a court or street,

¹ See p. 93. footnote.

² *Growing up in Shoreditch*, published by the Shoreditch Housing Association, Ltd., Toynbee Hall, 1938.

³ *Working-Class Wives*, edited by M. Spring Rice, Penguin Press.

obviously add unreasonably to the mother's tasks. To the lazy and weak they are an encouragement to dirty habits.

The answer to these problems for the good housewife is the chamber-pot, frequently emptied and cleansed, and of this we have little to say—it is a highly functional piece of domestic equipment. In the house of a slut it can, however, become a nightmare, and its use in a family which is poorly equipped and overcrowded may be extremely unpleasant. The lazy make use of it by day as well as by night. There are also complaints from London and elsewhere of the stairs of blocks of flats being used as latrines both by boys and drunken men, in true eighteenth-century style.

There is evidence that not infrequently women of the poorest class put down newspaper for small children to defaecate on and then burn it in the fire, and sanitation may, it is said, be so bad that this is the practice of the clean rather than the dirty mother, presumably because the drains are obstructed. Big boys and girls are sometimes found who know no other sanitary habits, and children thus trained must have found themselves at a loss when evacuated, so that their conduct startled their hosts.

The effect of really gross sanitary habits must be coarsening. In boys the habit of exposure is formed, and is said to be fostered by a widespread belief that it is injurious for the male to control the natural functions and that he is less able than the female to do so. These beliefs, of which an authoritative contradiction would be welcome, have led to an undue tolerance of indecency in boys. Urination in the street by boys is often seen ; in poor quarters it is obviously a game ; in the better streets an adult with a little girl will generally meet a request from her by taking her into a convenience or shop, whereas a boy may be told to use the gutter.

There should be less acceptance by those in authority of bad habits in children in public places such as waiting-rooms, and the police should take a kindly but firm attitude toward public hygiene and decency. Health Visitors should have the subject of sanitary habits included in their training and should be expected to deal with it in the home and clinic.

SANITARY TRAINING IN THE SCHOOL

The prevalence of enuresis and soiling would be much diminished if children were trained in nursery schools. Much could be said of sanitary training in the school proper. In spite of the excellent precepts of the Board of Education, some witnesses have given dismal evidence of the extent to which school sanitation may still

be deficient in standard and crude in character. Infants' schools ought not in our day to have closets across a yard. Girls and boys should not, in the building where the State is preparing them for home-making and citizenship, find closets which are archaic, evil-smelling, unprovided with toilet paper, and for the use of which they may have to wait in an open yard without shelter. The authority responsible for school premises in town or country should be obliged to bring sanitary conveniences up to a high minimum standard of hygiene. The shortcomings of country schools in this matter are reported to be in many cases flagrant. The supply of proper toilet paper (not newspaper) should be obligatory.

The training of children not already trained in their homes to use the closets is essential social education ; no excuse should be accepted for its neglect. In infants' schools a nursery helper should be formally entrusted with the task of teaching sanitary habits and instructed as to its proper performance. Help should be available where necessary for children in the lowest class of the Junior School.

Training colleges for men teachers should lay particular emphasis upon the need for the good training of boys, and Education Authorities should invite all boys' schools to campaign on prescribed lines against the indecency which so often disgraces the nearby streets after the end of a session.

THE IMPROVEMENT OF DOMESTIC SANITATION IN PROPERTY

As regards the provision of W.C.'s in dwelling-houses, it must be recognised that the extremely low standards which are tolerated, and the dark, badly ventilated or inaccessible W.C.'s in many old properties are due to the high cost of installing water-borne sanitation and the difficulties of insisting on this expenditure for houses which are nearly due to be scheduled for demolition. Further, it is unsatisfactory just to build extra W.C.'s in a backyard : the provision of satisfactory W.C. accommodation means adapting buildings and expensive plumbing. The problem for the Local Authority is how to decide on a policy for border-line properties—houses which are not good enough to repay complete reconditioning, nor bad enough to be included in a clearance area and acquired at site value. There is the further problem of clearance areas which cannot immediately be cleared because new houses and flats are not yet available for rehousing the tenants. While fully recognising the difficulties of this subject, it is impossible to accept the prospect of thousands of human beings continuing to live for years in foul and insanitary

property because the cost of equipping it with further water-borne sanitation is prohibitive. The provision of an adequate number of W.C.'s is nearly as important as keeping the roof in repair, which the landlord is required to do in any case where the house is tenanted and he is receiving rent.

It should be possible for local authorities so to organise their rebuilding programmes that they can fix the date of demolition for all condemned properties, and if any properties are to stand for more than a year it is not too much to require that additional W.C.'s should, where necessary, be provided. Where houses are given a life of upwards of ten years, a separate W.C. for each family, accessible without going down more than one flight of stairs, should be the rule.

RECOMMENDATIONS

1. Enuresis should be studied as a problem of the home.
2. Training in sanitary habits should be regarded as an important part of health education, whether given in the home, or health centre by Health Visitors, or in infants' schools. In the latter nursery helpers should always be appointed.
3. Vigorous steps should be taken to bring the sanitary arrangements of schools, beginning at the worst, up to an adequate standard within a set period.
4. Legislation should be enacted requiring the provision of separate sanitary accommodation for each family, whether in new or old property.
5. Pending this legislation, a campaign for the provision of such accommodation should be undertaken.
6. Blocks of flats should be provided with downstairs or yard accommodation for children to use during play hours.
7. The Ministry of Health should survey the adequacy of local sanitary inspection and insist upon the maintenance of a reasonable standard.

(d) *Bodily Dirtiness*

Some of the evacuated mothers were accused of refusing to wash themselves or their children, and episodes are recorded such as one of them staying at a farm for a week without washing. Some school children were also said to have no regular habit of washing even face and hands, much less body. Helpers, who washed children on arrival said that their feet were often grossly dirty. One told us

of a child whose ears were almost stopped with dirt; her mother, a poor, sickly creature, was glibed at by the father as "afraid of hurting" if she washed her.

Almost the only source of information as to bodily cleanliness is the extremely imperfect statistics furnished by the school medical service.

As already mentioned, the Board of Education, in its prescribed tables, lumps together cases of bodily dirtiness, head lice, and body lice under the euphemistic heading of "uncleanliness". Separate figures for one or other defect can, however, sometimes be found in the reports of individual school medical inspections. Such figures must perforce be used in the absence of any others, but they give no satisfactory information as to the prevalence of dirt or vermin.

Examples of the statistics available are :

		1938.	1937.	1927.
<i>Liverpool.</i> Body or clothing dirty. (Routine medical inspection.)	Boys .	4.7 %	3.3 %	
	Girls .	3.4 %	2.1 %	
<i>Sheffield.</i> (Routine medical inspection.)	Boys .	0.53 %	0.13 %	7.0 %
	Girls .	0.45 %	0.1 %	7.4 %
<i>Hull.</i> Dirty, but no nits or vermin. (Nurses' examination.)		0.5 %	0.3 %	

These figures are all unsatisfactory, those from Liverpool and Sheffield because they are based on routine medical inspection, and those from Hull because they do not relate to all children whose bodies were dirty. Those from Liverpool are, nevertheless, substantial and might well be doubled or trebled if based on the nurses' examinations. Professor Simey records that of 865 children evacuated from Liverpool, 61 were dirty, 76 dirty and verminous, and 41 clean but verminous. Thus 137 children, or more than 3 in 20, were dirty, presumably in their bodies and clothing. It may be assumed that such cases do not find their way into statistics unless the dirtiness is gross.

Lousiness, scabies, impetigo and ringworm are stigmatised as "diseases of dirt," although the significance of this term is often misunderstood. The scabies mite has no liking for dirt, and neither it, the louse, nor the coccus of impetigo feeds on it. The removal of clothing next the skin, however, disturbs them and is apt to lead to their discovery and destruction, while soap and water are noxious to them and consequently preventive. Lice and parasitic skin diseases are rampant amongst those whose bodies and clothing are unwashed but almost absent amongst people of cleanly habits. The dirty are a constant source of danger and expense to the community,

and it is they who make any aggregation of human beings a torture to the sensitive and a menace to public health.

The lack of proper washing of bodies and clothing is in part a housing problem resulting from the inadequate water supply and washing facilities in old property.¹ One of the writers who has carried out extensive housing surveys thus describes the homes in which many London and some provincial children live :

“ A typical slum tenement is the made-down house occupied in the last century by a middle-class family—a house with basement kitchens ; with one W.C., either on the ground floor or outside in the yard ; with one, or perhaps two, cold water taps in the back basement or outside washhouse, and perhaps on the staircase ; no hot-water supply, no means of heating except a kettle or saucepan, and no bath. Such a house may be inhabited by anything from two to ten families, and if additional W.C.'s have been provided by order of the Sanitary Authority, they are generally provided in a row in the yard. For people living in such conditions there is hardly any privacy, there is no place for more than two or three people to have a meal together, no facilities for adults to have a bath or even a good wash, no adequate facilities for drying clothes. There is often no place to store food. A woman already sufficiently handicapped by these intolerable conditions frequently has to contend as well with damp, with smoking chimneys, with old, uneven floors which are difficult to clean, and with bugs, beetles and other vermin.”

There are disgraceful slums in country towns and rural districts, but the many thousands of crowded tenements and stifling courts in large cities, with the open country many miles away, make living conditions in the town slums intolerable.

Growing up in Shoreditch gives these facts as recently as 1938 :

Water Supply and Heating

In 367 cases, 124 or 1 in 3 had no indoor water supply. In 347 cases, 100 or 30 per cent. had to carry their water up or down from 1 to 3 floors (in 9 cases it was 3 floors). In 365 cases particulars were :

Private supply	208 cases or 56 %
2 families sharing supply	100
3 " " " "	41
4 " " " "	11
5 " " " "	3
Half a street " "	2

365

Thus in 57 cases the supply was shared by 3 families or more. In two instances a pump was the sole source of supply for several houses.

¹ In 1935 Birmingham had 38,773 back-to-back houses, 51,794 without a separate W.C. and 13,650 without a separate water supply. See *When We Build Again*, pub. Bourneville Village Trust (Allen & Unwin), 1941, p. 31.

It will be remembered that *The New London Survey* found only one-half the houses investigated with a water supply inside the tenement (see p. 40).

In 402 cases the means of heating water were :

- 3 families used a geyser.
- 214 families used a copper or boiler, generally shared by several families.
- 185 families, or nearly half, *used a kettle only*.

Baths

Few of the Shoreditch families had a bath in their homes. Some had a footbath or small tub, but as it was awkward to use and often kept in a living-room or bedroom, it was frequently reserved for the children, whilst the parents went out to the public baths or else never bathed. Arrangements for bathing in the homes were :

Families using a proper bath	55 or 14 %
Families using a tub	69
Families having no facilities at home	<u>268</u> or two-thirds
Total	<u>392</u>

Dr. Gladys Stableforth, of the Kent Local Education Authority, in 1938 made an interesting investigation of clothing and ablution in school children, relating, she states, to the urban areas. Some few children had no nightclothes, but slept in their dayclothes, while many wore a day-vest under nightclothes. The great majority, especially in the elementary schools, had no more than a weekly bath and some had no regular bath at all. She remarks :

"With the greater number of our school children, the body remains covered absolutely for one week without any chance for the skin to be refreshed by air, water or freshly aired clothing except in the summer time.

"In one road, where there were to be found some of the worst cases for clothing and cleanliness, I was told there was only one tap to serve six houses and in one of these houses there were nine children, father and mother. . . ."

Dr. Stableforth's point about the merits of aired clothing has come home to many of us in our recent strange experience of sleeping dressed for an emergency, when we have realised that airing the skin and putting on aired garments is almost as refreshing as a bath, and that, on the contrary, to sleep without complete undressing or in garments which cling to the skin is a source of acute discomfort and stuffiness. It is encouraging to see in the reports of some School Medical Officers an account of the efforts made to induce children to

come to the physical training lessons lightly clad. The habits of undressing and of maintaining bodily cleanliness are closely associated, and the more a child is induced to accept and enjoy a healthy habit of exposure of the skin to light and air, the more will the equally natural animal habit of cleanliness assert itself. The more, too, will he store the precious Vitamin D in his skin.

SUGGESTED MEASURES FOR HYGIENE IN THE HOME AND SCHOOL

Bodily dirtiness has a very direct relation to housing conditions. A plea must therefore be recorded for the maximum possible activity in the matter of rehousing and slum clearance, for the reinforcement of sanitary inspection, the adequate reconditioning of suitable property and the full use by Local Authorities of their powers under the Public Health and Housing Acts and by-laws. While it is recognised that there are parents who are lazy and careless about the condition of their children, it is nevertheless deplorable that Local Authorities should encourage dirtiness by tolerating the frequent gross inadequacy of domestic water supply in poor quarters.

The second line of attack in the battle for personal cleanliness is the school, and the Board of Education's slogan should be "The poorer the scholars, the better the school". The Board's pamphlet 107 (1937) lays down an admirable standard, although its force is somewhat weakened by the subsequent issue of Circular 1472 emphasising its optional character. In particular we would quote :

"A plentiful supply of hot water throughout the school year, with an adequate supply of soap and towels, is one of the most effective aids in the social instruction given in the school." (Para. 67.)

And

"The provision of an adequate supply of toilet paper in the offices is as important as the supply of soap and towels in the lavatories." (Para. 71.)

Increasing and sometimes enthusiastic attention is paid to the subject in some local reports, *e.g.* London and Birmingham, from 1937 onwards. Some, however, and these are apt to come from the less monied authorities, make little or no reference to it, while the content of yet others is disturbing. Hull, for example, observed in 1937 that annual surveys of school hygiene had been resumed after a lapse of about six years due to considerations of economy (no doubt following on the financial crisis of 1931) and that the year's surveys had been "limited to a few of the older buildings" as no good purpose would be served by "making recommendations which

could not be dealt with". Such a statement may indicate a grave condition in the schools of this city which, suffering as it does from all the difficulties of a port and showing heavy figures for uncleanness and skin disease, has every need for the standard of hygiene in its schools to be particularly good. It would be interesting to know what steps are taken by the Board of Education to follow up such a statement and ensure the attainment of a satisfactory standard by the authority from whose area it emanates.

There is too great a contrast between the evidence offered to the writers of ugly decoration, poor and inadequate washing and sanitary accommodation, lack of hot water, towels and toilet paper, especially in the poorer schools, and the optimistic tone sometimes prevailing in official reports. The Board is strongly urged to put forthwith a survey of *all schools* and take further improvements similar to those taken when certain non-provided bodies were granted up to 75 per cent. to construct or recondition senior schools at the time when the Education Act of 1936 was passed. Schools displaying deficiencies which could be remedied without great expenditure should have the necessary work put in hand forthwith, but the Board should follow a policy of compulsory closure and, where necessary, replacement of all schools on the Black List¹ and those slightly above that standard, proceeding steadily to the establishment of an ascending standard of school hygiene and accommodation. As regards the schools whose immediate closure is not indicated, the Board should consider what means may be taken to ensure, by special grant-aid if necessary, the observance of a minimum standard of hygiene, including the provision of adequate sanitary conveniences with toilet paper, shower baths and washing facilities with hot water, towels and soap. Any steps taken to learn from the improvisations of the less wealthy countries abroad would help our own poorer Education Authorities.

The attention now increasingly paid to physical training, swimming and games is found to have the most beneficial effect upon cleanliness, both of person and clothing, and the Board of Education emphasises these activities as forming a proper part of life in an elementary school. Here again, however, there is room for an assurance that pressure is steadily exerted to bring backward authorities up to a good standard of performance, both as to the

¹ In 1925 the Board of Education produced a Black List of schools whose buildings were such that they were considered incapable of being put into a state of decent repair and should therefore be abandoned. In 1939, 741 of these schools were still in use. Of these 741, 212 were Council schools (Lord Faringdon, House of Lords, July 15, 1942, Hansard, col. 839).

major arrangements and also such minor points as the provision of gym shoes.

Local Education Authorities should be required from year to year to give an account in their published reports of the use which they have made of various permissive powers and to report at length upon specified subjects, such as the sanitary and decorative condition of their schools. The report should have a prescribed framework, calculated to disclose deficiencies as well as elicit work done, *e.g.* to state the number of schools *not* decorated for a given term of years or in which sanitary accommodation is *not* up to a given standard or hot water *not* available.

An interesting account of methods used to train children in a school on a new housing estate largely occupied by families recently cleared from a slum area of Liverpool is given in Appendix XIII. It emphasises the personal influence of the teaching staff. A clean and tidy person was required as a part of the respect owed by the child to itself, its school, and its teachers. To impart this conception is to give true education for life.

RECOMMENDATION

The Board should require Local Education Authorities to report annually on the action taken to ensure a high standard of school hygiene, in such a form as to disclose deficiencies as well as progress. The worst premises of every authority should be listed by the Board and special mention of these should be required in the Annual Reports.

MENSTRUATION

There were some few reports of evacuated mothers who wore no protection during menstruation, and of girls similarly unprotected. One witness reported to the writers that two girls when approached replied that their mothers wore nothing and that they did not intend to do so either.

Information as to practice in a matter so intimate is not easy to obtain, and no full enquiry has been attempted. It may be recalled, however, that when the Suffrage Campaign brought women of education into Holloway Gaol, they found that no provision of any kind was made for women prisoners in this respect. If this means anything beyond abominable administration, it means that women of the class commonly committed to the gaol were not expected at that date to require such refinements, and for all we know their use by some classes of society may be relatively recent.

Evidence has been received that some menstruating women attending clinics wear no satisfactory protection, that it is a commonplace for girls to present themselves at domestic training centres without provision of any kind, and that many girls in factories use nothing but wads of toilet paper. The hygiene of menstruation is, it appears, dealt with only exceptionally in elementary schools, where some few headmistresses set their girls to make washable sanitary towels in the top class. It finds no mention in the Board of Education's handbook on Health Education.

The subject is not an easy one. The ordinary wear of yesterday was the washable towel, generally made from Turkish towelling. It is, however, when soiled, unpleasant to store and to wash either at home or in a laundry, and no brief is held for it except as a standby. The more modern substitute is a manufactured pad which is destroyed after use by burning or else unjacketed and thrown down the closet, where it dissolves. This is obviously much preferable and should be in general use. While, however, many earning women and girls can perhaps afford from a shilling to half-a-crown a dozen for these articles, they are beyond the means of the housewife in poverty, nor can she provide them for her girls while still at school or during their first earning years, especially where these include periods of unemployment. An examination of the provision amongst girls in Junior Instruction Centres would, for example, probably have yielded very unsatisfactory results.

The subject of menstruation is unhappily so much shrouded in secrecy as to suggest a taboo amongst a savage tribe, and indeed the savage's conception of it as unclean is very far from having disappeared in our community. It is surrounded by myth in the popular mind, such as the belief that a menstruating woman cannot make butter "set" in the churn, and should not touch meat in a pickle tub. There is a widespread and most unfortunate belief that baths should not be taken during the menstrual period and that exercise should be avoided. Medical science finds, on the contrary, that normal exercise at all times tends to obviate pain and produce a healthy, natural functioning.

The mischief is, however, far more serious owing to the survival, in the atmosphere of mystery which surrounds the subject, of the tribal outlook upon it. Women themselves are generally unaware of the extent to which this function is present in the minds of responsible persons in judging of their capacity to enter fresh fields but startling light was thrown upon it when the alleged incompetency of women in menstruation to be entrusted with the lives of passengers

was made the ground for refusing to grant them the Pilot's B Certificate for flying. A committee of women doctors had to be set up to contest this decision, which they did successfully.

The time has come when, in the name of sense and humanity, the whole phenomena of human reproduction should be faced as a matter of the keenest and most proper interest to the young, whose education is surely meaningless unless it recognises in them the makers of men, to be prepared for that common but tremendous task as completely as our imperfect wisdom allows. The reproductive organs in both sexes, but more universally in girls, commence their activities at an age which, in the society of to-day, and still more in that of to-morrow, is still that of childhood and school attendance ; this maladjustment between physical and social maturity is fraught with difficulties for the young, and the sincerity of education must be measured by the efforts made to enable them to face it without perplexity and disaster. If education is a preparation for life, no boy or girl can be educated without instruction as to the main bodily functions, and the plea that such instruction should be left to parents is mere evasion so long as many parents, of all social classes, are themselves ignorant and timid of this subject. Sex instruction should not be divorced from the field of biological teaching to which it belongs ; elementary biology and physiology, including the nutrition, excretion and reproduction of plants, animals and human beings, should be taught in all schools as a basis for the teaching of hygiene. These subjects should, where necessary, be taught by visiting specialists, who should deal with relatively small groups of schools and be familiar visitors in them.

For older people, 1940 saw an important step in industrial welfare : the Factories (Medical and Welfare Services) Order was made, enabling certain Inspectors of Factories to direct employers engaged on government work to employ doctors, nurses and supervisory officers for the purposes of medical supervision, nursing, first aid and welfare. This has been followed by the institution of state-aided courses in industrial nursing for state registered nurses, to qualify them for employment in factories. The strengthening and extension of this Order would do much to raise the level of hygiene in the community, and should be the policy of the future.

RECOMMENDATIONS

1. Elementary biology, including nutrition, excretion and reproduction, both human and animal, should be taught by fully compe-

tent persons in all schools. Hygiene instruction should be related to this teaching.

2. A public utility concern should be set up to manufacture soluble sanitary towels at a low price for widespread sale including supplies through slot machines which should be suitably installed in schools, Maternity and Child Welfare Centres and factories.

3. A small expert committee should be set up to consider menstruation in its social aspects. The committee should take into account the work done on this subject, particularly in certain factories in Russia and America.

4. The Factories (Medical and Welfare Services) Order should be strengthened and extended to provide medical and nursing supervision in all factories.

5. Standards should be laid down by means of a Welfare Order for the hygienic equipment of factories where women and girls are employed. This equipment should include bins or other means of disposal and, in the larger factories, private bathing cubicles.

In closing this section, with its recommendations for home, school and factory, it is right to stress once more the supreme importance of going to the root of matters of health and hygiene by methods other than providing services of which the mother in poverty can avail herself at the cost of personal effort. Such measures will pass by many of those most needing them, including the "problem" cases. *The health services must be taken into the home.*

The person who has the entry of even the poorest home where there are, or soon will be, young children is the Health Visitor. As a part of the Maternity and Child Welfare Service, entrusted with the task of advising upon the health of children up to the age of five, she is one of the most important workers in the community and should be one of the most carefully trained and utilised. She should not, as at present, be extensively diverted to functions other than home visiting.

RECOMMENDATIONS

1. Health Visitors should be trained in social case work. Their training should include verminous infestation, skin diseases, hygiene in menstruation, and sanitary habits.

2. They should be regarded as essentially domiciliary workers, and the Ministry of Health should prescribe a minimum portion of their time—say 60 per cent. average—to be spent on domiciliary work.

3. They should not confine themselves to the following up of births and cases from the clinics, but should carry out door-to-door campaigns in specially poor quarters on the basis of information supplied by teachers, midwives, school attendance officers, local social workers and the records of the National Milk Scheme.

CHAPTER IV

THE FUTURE HOPE

Now that through evacuation the depth of our social failure can be appreciated, can any measures be found which seem to hold real hope for amelioration ?

We think they can, and that no whit of the impetus resulting from the shock to the public conscience should pass unused.

Better education and better environment must continue to help the children of to-day to see themselves as the architects of their country's future : to inspire in them a sense of purpose, a desire to lay their individual stone in the building of Jerusalem.

Towns are, from time immemorial, the centres of human thought, learning, and the arts. They have enriched the national life with cathedrals and universities, great teaching hospitals, technical schools, museums, opera houses and picture galleries. Their wealth has made possible an immensely higher standard of living, with collective services such as modern sanitation. The appeal of their social amenities, medical and educational services and varied opportunities for employment is strong and legitimate. But town life, with its fine and civilised flower, must be made to root in wholesome earth and not in fetid slime.

It is impossible to consider the conditions of town life without reference to local government. Obviously the social and financial problems of the great industrial aggregations of to-day require to be tackled in accordance with a consistent long-term policy formulated with vision and disinterestedness. Whether a system of transitory Mayors, supported by a lawyer Town Clerk and a battery of committees, is best calculated to ensure these things is a matter for urgent consideration ; it is not unknown in the authors' experience for Directors of Education and Medical Officers of Health to complain that their reports excite little interest.

The grouping of towns in regions for the larger purposes of local government seems now a fortunate probability.

The country has faced the changing life of the past two centuries better than the town, because it has been able to build on the old pattern without radical change. The towns need a different technique of living, which has not yet been fully devised. With their great masses of people, largely segregated according to social class, they have destroyed the feudal conception of rights and duties without progressing to a society which is democratically integrated. Society has not learned how to give the poor in towns economic well-being; to preserve in them the sense of individual consequence; to lend beauty and order to their environment so that they may not become cut off from the earth, thwarted in their natural cravings and encouraged in shallowness.

It would be unjust not to recognise the great and even revolutionary progress that has been made in social legislation during the past half-century since education became compulsory. The stream of enactments is unceasing and the Midwives Act, the Holidays with Pay Act, the School Camps Act are but a few recent examples. A photograph of Bermondsey schoolboys in 1894,¹ ragged, barefoot and wretched-looking, must be seen to be believed. To look back on the conditions then prevailing is, however, to be filled not with complacency over progress made, but with shame and horror that the people of England, at the close of a century of unexampled prosperity, should have been allowed to live in degradation.

It is time for us to look outwards rather than backwards; international standards of health and hygiene have risen beyond recognition of late years. Lice, dirt, and skin disease, from having been generally accepted or endured by our ancestors, have come to be recognised as loathsome class distinctions which are amongst the most difficult social barriers to surmount. They bear most hardly upon the decent poor, who are forced to neighbour with those who spread them. Their persistence among large numbers of our elementary school children is uncivilised and ought not to be tolerated. Britain's slums are widespread and a source of shock and scandal to fellow-citizens of the Empire. Yet local authorities' reports upon their health, housing or education services in territories which include large problem areas are often dreary with complacency and the School Medical Officer whose report is informed by the "offensive spirit" stands out in sharp relief.

The interrelation of factors responsible for the dark side of our town life has perhaps not yet been sufficiently stressed. The importance of poverty as a root cause is illustrated by a striking table

¹ Reproduced by Dr. C. J. Thomas, L.C.C., *Medical Press*, July 5, 1939.

in which Titmuss¹ shows that Durham and Northumberland have, as compared with all other regions in England :

A very low income level, particularly in Durham, where it appears to be the lowest of any county.

The highest overcrowding rate.

The highest death rate and infantile mortality rate.²

The highest death rate for children up to 4 years of age, with a particularly heavy excess of deaths from respiratory diseases.

The highest death rate for children from 5-14 years, with a heavy excess of deaths from diphtheria and tuberculosis.

The highest maternal mortality rate, more than double that of Greater London.

The high mortality rates are not due merely to climate, for some other northern regions make a widely different showing. Pneumonia, diphtheria, tuberculosis, measles and whooping-cough are the diseases of poverty which ravage child life in the overcrowded slum, and they are here at their worst. High death rates, especially for children, mean widespread suffering and impairment amongst the survivors. If rural Northumberland were excluded, the picture of interlinking poverty and ill-health in this region would be even more compelling.

Poverty leads to bad housing without the space, water supply, food storage, cooking facilities and private sanitation essential to good home-making. Ill-found accommodation encourages bad feeding. Slum conditions—noisy streets, crowded beds, the irritation of bugs, lice and skin diseases—murder sleep. Everything that militates against healthy living encourages skin diseases, which are often closely associated with vermin. Bad feeding, inadequate sleep, insufficient air and lack of healthy exercise and recreation affect mind as well as body, and aggravate the serious and growing problem of the dull child, already estimated by the Board of Education to number 15 per cent. of the eight-year-olds in elementary schools.³ According to the Report of the Mental Deficiency Committee,⁴ dull children grow up to produce most of the problem families of the next generation including many of the feeble-minded. They bulk large among the unemployables and are often dangerously suggestible. Their dullness leads to bad spending and household

¹ *Op. cit.*, pp. 304-5.

² See *Statistical Review of England and Wales for the Year 1937* (H.M.S.O.), 1940, p. 26 (quoted in Appendix XIV).

³ *The Education of Backward Children* (H.M.S.O.), 1938, p. 10.

⁴ See Part I, pp. 92-3 ; Part III, p. 83.

management, undeveloped character and lack of parental control. Juvenile delinquents are strongly associated with poor parental control and also with dullness and backwardness. Overcrowding degrades family life and warps character, again breeding delinquency through unhappiness and emotional frustration. Bagot found the proportion of delinquents living in overcrowded conditions so high as to suggest that overcrowding may be one of the main causes of delinquency. It may produce a low social standard and coarse habits.

Children who are dirty, undisciplined, unhealthy and ill fed have no standards of well-being and later accept these conditions in their own offspring. Not only so, but they bring to parenthood enfeebled bodies and indifferent nerves. Battles are only the most sensational form of human wastage. Year by year dirt, poverty and disease pursue their unrelenting campaign against the most defenceless; year by year an army of little soldiers fight and fall almost before they have lived, or limp on enfeebled in body and warped in mind.

Rowntree¹ found in 1936 that half of York's workers were born into poverty; that 9 out of 10 of the unlucky half would continue to live in poverty for their first five years and half of them for the whole of their school life. He comments:

"There is not one of these children whose physique will not be permanently injured through the privation they have to undergo during the most critical years of life. . . . But the injury done to the health of these children is not confined to the privations from which they suffer during childhood, for the fact that a child is born into a family living below the minimum means that the mother was in poverty and her health consequently enfeebled while bearing it, so that the child not only suffers after, but also before it was born."

Can a nation with a falling birth-rate afford this continuing massacre of the innocents? There must be a new "Save the Children" campaign.

EDUCATION

More and more it is borne in upon us that the educational services get hold of the child too late. They must realise and give fuller meaning to the Jesuit's saying: "Give me the child until he is seven years old and I care not who has him afterwards." The first five of these years before school attendance is compulsory do much to form both body and mind, the last two are not enough to combat mischief already done.

The younger the child, the more likely it is to be living in poverty; the percentage so living is higher amongst the "under fives" than in any older group of the population, higher still amongst the "under

¹ B. S. Rowntree, *Poverty and Progress* (Longmans Green & Co.), 1941.

fours", and so on. Poverty spells overcrowding with all its evils. The five-year-old enters school suffering from all the complaints which the school doctors and nurses will spend their time in combating during his school life. The under fives have been found lousier than any other group; evacuation showed that children of five were already set in bad habits of every kind; and the psychiatrist would not fail to look in the first five years for the roots of delinquency; criminal statistics show, in fact, that a child may be a thief at seven or eight years of age.

An onslaught must be made on poverty by means of family allowances and minimum wages, and the children with unsatisfactory homes must be helped by letting them live day by day in a different environment; they must have nursery schools from the age of two years.

The nursery school can teach good eating habits; good sleeping habits; bodily cleanliness and care of teeth and hair; give sanitary training, regular exercise and stimulating play; accustom the child to hygienic and well-kept clothing and endow it with self-respect and intolerance of dirt and vermin. It provides individual medical and nursing care, and remedial treatment. It accustoms the child to discipline, both imposed and self-imposed. From this point of view it is valuable as giving the child a habit of concentration. Its use might be greatly enhanced if it were made responsible for picking out the "dull" children for the purpose of special educational and medical care. It can give social training in frankness and truthfulness, order, good manners to the child's own and the opposite sex, and a sense of helpfulness and duty to any group in which he finds himself, from the family outwards.

Nursery schools may be considered expensive, but the money spent on giving the child these early years of happy, healthy life may be far less than what is now spent on combating the ill-health, dirtiness, delinquency and misuse of property which result from a bad start in life, while the lives actually saved and the efficiency conferred are beyond price. We cannot afford not to have the nursery school; it seems to be the only agency capable of cutting the slum mind off at the root and building the whole child while yet there is time. The nursery years are those when parental affection is strongest, when the child is least inhibited and most certain to carry home openly what it has learnt at school and demand compliance with the new standards; they are in fact those years which give the best hope of influencing three generations—the child, its parents and its offspring.

Nothing in this study has impressed the writers so often or so deeply as the need to multiply these schools in the poor quarters

of towns. Thence they should spread and be provided for the children of all parents who desire to use them. The long lists of children awaiting admission to existing nursery schools are eloquent of the present unsatisfied demand.

Education in all its stages must be designed to enable the individual to develop initiative, self-respect and a sense of citizenship. Classes must be small enough for children not to be mere units in them; they should in no case be larger than 30 pupils.¹ Children should be given the widest possible range of activity in order that they may lay the foundations of a happy working life by finding their bent. Some form, however humble, of service to their fellows should be required from each of them at all ages in order to build character and establish self-respect. Older children should be constantly and freely associated with the management of younger ones.

The general establishment of nursery schools is essential to classless education as it presents a means of enabling children with different social backgrounds to mingle with a reasonable degree of common early training. It is perhaps the best that can be done towards ensuring that the sins of the fathers are not visited upon the children and that John Smith's child becomes in truth John Bull's child, a cherished part of its country's capital.

If education is to make its vital contribution to the future, the first necessity is a breaking down of the division between the elementary and secondary systems. In Scotland, America, and most other lands all children start their education in the same schools, and it is widely held that they ought to do so here.

Such an educational revolution would, more than anything else, lay the foundations for community life and expose the schools to the pressure of middle-class standards and requirements, which would cause many of the improvements urged in this memorandum to be conceded without question.

We would suggest that the educational system is ripe for a thorough overhaul by a strong committee of men and women who should consider the content of education, the recruitment and training of teachers and the welfare of children in schools.

Class and sex distinctions in the teaching profession must be

¹ The *Handbook of Social Statistics relating to Merseyside* states (p. 25) that in March, 1938, one-half of the classes in Liverpool, Bootle, Birkenhead and Wallasey had over forty pupils. The percentage for Liverpool alone was 52·4. For Roman Catholic schools alone it was 66·2, and for Council schools 48. On July 15, 1942, Viscount Samuel said in the House of Lords that before the war one-third of all the classes in elementary schools consisted of over forty pupils and 100,000 children received their education in classes of over fifty. He added that "Effective teaching is not possible in such conditions" (Hansard, col. 839).

broken down ; a special study should be made of the recruitment of elementary school teachers from sources wider than those at present utilised.

There should be a great concentration of attention on teachers' training and efforts should be made to enable those who have risen from poor surroundings to avoid the facile snobbery of despising their origins. Training should be designed particularly to inspire the students' interest in educating the whole child, as brainworker, as handworker and as maker of his country's future.

Teaching is social service of a high order, and, at its best, the handing on of inspiration. Children need contact with people of vitality, a flame at which they can kindle their own torch. The enemy of good teaching is mental staleness, boredom, and impoverishment in the teacher's personal life. Teachers should be enabled to keep their freshness of mind and to broaden their experience. Those so desiring should be entitled to take each seventh year off for change or study, and excellent refresher courses planned on broad lines should be freely available during holidays. It is wrong in principle that women whose duty it is to form young lives should be discouraged in any way from leading a full and normal life themselves ; the existence of a bar on the employment of married women teachers should be relegated to the limbo where it belongs, not only because the married woman can give from her added experience but also because the mother of the working class, especially at its poorest, has added confidence in those who can meet her on her own ground, and not infrequently protests against having to take advice about her children's education and health so largely from the unmarried.

The time has come for the Board of Education to assume a stricter control of the condition of school premises. Some country schools are still in private ownership, an intolerable anachronism ; such ownership should be abolished forthwith. The Board should be vested with compulsory powers to enforce, and if necessary pay for, a good minimum standard of school hygiene, including decoration in light colours, the supply of hot water, adequate and well kept closets with toilet paper, individual towels, drying accommodation for clothing, and a school canteen with properly balanced meals.

Town schools should have the regular use of country camps and boarding-schools, where children can be passed in and out freely as health, temperament and education require. Every child is entitled to know the country and to have the choice of a country

occupation. There should be varied provision by way of colonies, small homes or fostering arrangements for the children of broken or unsatisfactory homes, to which parents so desiring may relinquish children, either permanently, if that policy is judged expedient, or for substantial periods, and to which the children of parents who neglect them should be entrusted under the Children and Young Persons Act. Children so relinquished should, lacking the normal family affections, receive a very special degree of care and attention. Children of all classes should have the education of being away from parental care both by day and by night for a period each year.

The school age should be extended to sixteen years, special care being taken to provide the older, as well as younger, children with a varied and imaginative curriculum. Social activities, social service and co-operative work between boys and girls should be particularly marked during the added years, and it is suggested that a system of co-education might be universally adopted in them.

Education through employment is a subject requiring careful and extensive study. Questioning girls of all classes, especially the poorer, as to what occupation they would like to follow often elicits the answer : "Something to do with children." Far more of these girls should be trained for child care and employed on the staff of schools and such small Homes as have been discussed. A determined effort should be made to find more alternatives to the choice of inferior private domestic service or factory work which now confronts many girls of the poorer class, and to enable them to follow occupations which make it possible for them to realise their own desire to learn home-making and parenthood. The provision (under careful safeguards) of more home helps for working people with children would do good.

There is great need of such training for future wives. The girl who suddenly, with marriage, finds herself mistress of her day, requires self-discipline as well as skill in order to build up the good housewife's routine. If she has maternal example or good training behind her, she will have an incentive to make her beds, arrange a time-table of work, and keep up her personal appearance. If, however, maternal example and working experience are both lacking, as in the poorer type of factory worker, her prospects of good home-making are poor indeed.

Sometimes by the time she marries she has almost forgotten how to write for lack of any practice since leaving school ; any sewing and cookery she may have learnt have been lost for the same reason or because they were never sufficiently related to the actual conditions of her life to have significance. Education has left her

where it found her, the ignorant offspring of ignorant parents, with a child's mind in a woman's body, fit neither to be wife nor mother. Her husband's money may be poor and fluctuating in amount. She is not a good buyer, the world of seamy commerce is out to exploit her, the tools she can buy to do her work are poor and inadequate. She is faced with a task for a strong character and a good manager ; she is neither, and she gives up the unequal struggle.

Many witnesses have remarked that a girl of this type goes rapidly downhill in the first year of marriage. The smartness which she enjoyed when care-free and earning is often no longer called for because with the first pregnancy her husband ceases to take her out. From thence onwards she sinks into sluttishness and brings her children into it.

An important method of reaching the mother is to draw her into co-operation with the school. Children are not alone in needing to build self-esteem by rendering service ; every school should be made the lively concern of the neighbourhood it serves ; both mothers and fathers should be encouraged to help add to its amenities.¹ It should be made a source of local pride and a link between parents and children. Local education authorities should be enjoined to provide facilities for the organisation of parents' clubs and the Board of Education should take much stronger action to foster them through its Inspectors and through the School Managers.

Other clubs are needed too, and all schemes of redevelopment should provide premises where men and women can have accommodation with canteen facilities and a hall for common activities. Where no general reconstruction scheme is afoot, steps should be taken by Local Authorities to provide, particularly in poor quarters, simple and attractive club-rooms for men and women, with sewing-machines, carpenter's bench and facilities for boot repairing. The experience of the National Council of Social Service in setting up its Mutual and Social Service Clubs has shown the extraordinary difficulty of obtaining premises for such activity, especially in the smaller industrial towns. One of the writers has, for example, attended in a squalid city warehouse serving as a men's club, the meeting of a group of women from a near-by small industrial town. They were passionately anxious to form a club, but had no possibility of doing so unless they could induce the Chief Constable to change his mind and allow them to share with a group of unemployed men the privilege of meeting in the disused gaol ! The need for premises should be widely known, and the example of those religious bodies and Friendly Societies which show their

¹ Parent Teacher Assns. have made greater progress in the U.S.A. than here.

citizenship by generous lending or cheap renting of their halls for this purpose should be generally followed. Town Halls should be freely available to citizens of all classes for their more ceremonial meetings.

ENVIRONMENT

Social, including sanitary, reform is a growth of the last hundred years and descriptions of housing and sanitary conditions in the poorer parts of the towns when Edwin Chadwick and Southwood Smith started their labours are appalling. There is need for a far more equal distribution of the amenities—all town children need public parks and gardens, not only for play, but to ensure for the human spirit its right to feed upon the beauty of the trees and grass, flowers, water, clouds and the miracles of the changing year. There should be beauty in the design of even the humblest dwellings and measures to ensure that their seemliness is respected. New housing might well be selective, the people who live decently first getting the new accommodation, while those who have slum habits are transferred to good and clean old property (see Appendix X).

The "making-down" of good property for working-class occupation will necessarily continue and should be better controlled. The standard of adaptation permitted is far too low—a separate front door, water-closet, bathroom and kitchen to each "let" should be required. The landlord has always been the spoilt child of the law; it is time his rights and duties were re-defined, with special reference to working-class property. The ownership of all such property should be entered in a public register, and there should be a tightening up of the enforcement of by-laws.

The employment of trained property managers should be widely extended and made obligatory on Local Authorities. Cities should pursue a policy of mingling the classes and providing education and amenities upon a basis calculated to bring coherent local communities into being. It would be wholesome to have less "social work" by the conscientious well-to-do in regions remote from their homes, and much more neighbourly visiting of people in the next street born of genuine common interests; more helping the Smith child because he's bright and your own boy's fond of him. Such a policy would humanise the comfortable, acquaint them wholesomely with the incredible virtues and kindness of the working class, and ease the rapid transition to a more equal and democratic structure of society.

Measures for social betterment represent not merely the humble duty of the individual towards his neighbour but also the common

need to make the best of Britain's human capital, upon the quality of which she must increasingly depend for her position in the fast-changing and complicated world of to-day. A conversation overheard in a bus is not without appositeness here. As the vehicle passed down the main street of a prosperous seaside town, a group of poverty-stricken children was seen standing on the kerb. "They don't look much, do they?" said one housewife to another. "Well, anyhow," replied her companion, "that's what England always falls back on!"

CONCLUSION

They are indeed what Britain falls back upon, for in 1937 one-third of her families had breadwinners earning less than £2 10s. a week¹; and four-fifths of her population live in towns. It is in towns that four out of five of her babies are born, and in her poorest areas and her poorest class that the birth-rate is highest. "Wealth and babies," says Richard Titmuss, "are distributed throughout the country in inverse ratio." The subject of this book—the conditions of town life for the poorest—is one of great and vital importance for the future of the race.

The picture so far painted has been a grim one: a close-up of the black spots. Fortunately, there is a brighterside: courage and gaiety survive in the mean streets in spite of poverty, insecurity and neglect; the constant greatness of the human spirit, which refuses to be defeated by life, is not quenched in them, and in the present war the ability to face danger and personal loss has been nowhere more manifest than in the poor and overcrowded quarters of the towns. If men and women can, for the most part, guard in such conditions their kindness, humour and philosophy, there is rich material here. The newer constructive services—Maternity and Child Welfare, Probation, Child Guidance and others—have achieved results which are eloquent of the great response that waits on better opportunity. The message of this book is that the efforts made, the services offered, fall far short of what is necessary. Great and radical reforms are needed to give humanity its chance.

Only to-day, with our erstwhile lavish supplies ruthlessly curtailed, do we realise how wasteful we have been of common things—food, paper, rubber, and the rest. Only to-day, with a falling birth-rate, do we see how wasteful we have been of human life—body, mind, and spirit. If we believe in human dignity and human worth, we must take up the challenge of September, 1939.

¹ *The Home Market*, London Press Exchange (Allen & Unwin), 1939, p. 62.

BIBLIOGRAPHY

ADVERTISING COSTS

Government and Industry. By S. Courtauld. Macmillan, 1942.

EDUCATION

Children in Soviet Russia. By D. Levin. Faber & Faber, 1937.

The Education of Backward Children. H.M.S.O., 1938.

Education and the Birth Rate. By Leybourne and White. Cape, 1940.

"Elementary School Buildings." Board of Education, Educational Pamphlets, No. 107. H.M.S.O., 1937.

"Then and Now, The School Medical Service." By C. J. Thomas, L.C.C. *Medical Press*, July 5, 1939.

The Future of Education. By Sir R. Livingstone. Cambridge University Press, 1941.

ENURESIS

"Nocturnal Enuresis." By S. Gill, M.D., D.Ph. *British Medical Journal*, September 10, 1940.

"Enuresis." By L. C. Browne and A. Ford-Smith. *British Medical Journal*, December 6, 1941.

EVACUATION

Borrowed Children. By Mrs. St. Loe Strachey. Commonwealth Fund, 1940.

Evacuation Survey. By R. Padley and M. Cole. Routledge, 1940.

Our War-Time Guests (foreword by Professor Simey). Hodder & Stoughton, 1940.

Parliamentary Debates, Commons, September 14, 1939 *et alia*.

Report of the Ministry of Health for the years 1939-1941.

"Evacuation: Some Epidemiological Observations on the First Four Months." By J. Alison Glover. *Proceedings of the Royal Society of Medicine*, May 1940. Vol. XXXIII, pp. 399-412.

Cambridge Evacuation Survey. By Susan Isaacs. Methuen, 1941.

HEALTH

Annual Reports of the Medical Officer for Schools, L.C.C. and various evacuation and reception areas.

"Epidemiology of Juvenile Rheumatism." Morris and Titmuss. *Lancet*, July 18, 1942.

"Health of the School Child, the Annual Report of the Chief Medical Officer of the Board of Education." H.M.S.O.

Health Education. Pub. Board of Education, 1939.

Poverty and Population. By R. M. Titmuss. Macmillan, 1938.

Poverty and Public Health. By McGonigle and Kirby. Gollancz, 1936.

Report of the Royal Commission on the Distribution of the Industrial Population. Cmd. 6153, 1940.

Report on the British Health Services. P.E.P., 1937.

Report on the Distribution of Industry in Britain. P.E.P., 1939.

HOUSING

Europe Re-Housed. By Elizabeth Denby. Allen & Unwin, 1937.

Growing up in Shoreditch. Toynbee Hall Housing Assn., 1939.

The Houses of the Workers. By A. Sayle. Fisher Unwin, 1923.

I Lived in a Slum. By Mrs. Cecil Chesterton. Gollancz, 1936.

Report on an Enquiry into the Diet and Expenditure of Unemployed Families. Newcastle Dispensary, 1935.

Report on the Overcrowding Survey in England and Wales, 1936. H.M.S.O., 1936.

Working-Class Wives. By M. Spring-Rice. Pelican Books, 1939.

HOUSECRAFT TEACHING IN SCHOOLS

- Memorandum of Evidence submitted by the Association of Teachers of Domestic Subjects to the Departmental Committee on Domestic Subjects in Public Elementary Schools. A.T.D.S., 1938.
 "Provision of Materials for Practical Instruction in Public Elementary Schools." Board of Education Administrative Memo. No. 158, 1937.

INDUSTRIAL ASSURANCE

- Annual Reports of the Chief Insurance Commissioner. H.M.S.O.
 Report of the Committee on Industrial Assurance of Children under Ten Years of Age. Cmd. 4376, H.M.S.O., 1934.
 Planning, July 1942. "Planning for Social Security." P.E.P.

JUVENILE DELINQUENCY

- Annual Reports of the Commissioner of Police for the Metropolis.
Juvenile Delinquency. By J. H. Bagot. Jonathan Cape, 1940.
 "Juvenile Delinquency," Report of an Enquiry made by the National Association of Probation Officers. *Probation*, Vol. 3, No. 17, February, 1942.
New Light on Delinquency and its Treatment. By Healy and Bronner. Yale Univ. Press (London: Humphrey Milford), 1936.
The Child and the Magistrate. Watson, 1942.
The Young Delinquent. By Cyril Burt. London University Press, 1927.
Young Offenders. By Carr-Saunders, Mannheim and Rhodes. Cambridge University Press, 1942.

NUTRITION

- Food, Health and Income.* By Sir John Boyd Orr. Macmillan, 1936.
Nutrition and Public Health. Pub. British Medical Assn., 1939.
Nutrition and Size of Family. By the Birmingham Social Survey Committee. Allen & Unwin, 1942.

SKIN DISEASES

- Diseases of the Skin.* By J. M. H. MacLeod. West, 1939.
 "Scabies." Ministry of Health Memo. 229 Med., 1940.

VERMIN

- Circular 2306, Ministry of Health; 1544, Board of Education, 1941.
 "The Bed Bug and How to Deal with It." Ministry of Health Memo. 180 Med., 1936.
 "The Incidence of Head Lice in England." By K. Mellanby. *Medical Officer*, February 1, 1941.
 "The Louse and How to Deal with It." Ministry of Health Memo. 230 Med., 1940.
 "The Louse." By P. A. Buxton. Royal Soc. of Tropical Medicine and Hygiene, 1940. (Reprinted from *Transactions of Soc.*, 1940.)

GENERAL

- Life and Labour in London.* By Charles Booth. Macmillan, 1900.
The New Survey of London Life and Labour. King, 1934.
Poverty and Progress. By B. S. Rowntree. Longmans Green, 1941.
Social Survey of Merseyside. Hodder & Stoughton, 1934.
Social Services in N. Lambeth and Kennington. Oxford University Press, 1939.
Redeeming the Time—A Survey of the Junior Instruction Centre Movement. By Owen E. Evans. Liverpool University Press, 1941.
 Registrar General's Statistical Review, 1937.
 Report of the Mental Deficiency Committee. H.M.S.O., 1929.

FICTION

- Charlie is My Darling.* By Joyce Cary. Michael Joseph, 1940.

OUR TOWNS

APPENDICES

APPENDIX I

LIST OF WITNESSES INTERVIEWED

1. Miss Winny, Head Mistress of Daubeney Road L.C.C. Infants' School, Hackney.
2. Miss Walsh, Head Mistress of Scawfell Street Senior Girls' School, Shoreditch.
3. Miss Morrell, Superintendent Health Visitor, Shoreditch.
4. Miss J. Clarke, Assistant Organiser of Children's Care in St. Pancras, Hampstead and Holborn.
5. Miss L. M. O'Kell, Chief Billeting Officer of Abbots Langley (formerly Sanitary Inspector and Health Visitor in the Paddington area).
6. Mr. R. A. Bishop, Sanitary Inspector, Shoreditch.
7. Miss D. C. Keeling, Assistant Secretary, National Council of Social Service (formerly Secretary, Liverpool Personal Service Society Inc.).
8. Mrs. Barclay, Chartered Surveyor, Woman Housing Manager.
9. Miss I. N. Hill, Organising Secretary, South St. Pancras Charity Organisation Society.
10. Miss Purdon, Central Council for Women's Training and Employment.
11. Miss K. M. Walls, Ministry of Labour and National Service, London and S.E. Region.
12. Mrs. Chalk } two voluntary helpers in a reception area, from St.
13. Mrs. Sheppard } Pancras.
14. Miss E. A. Shepherd, Ranyard Worker in Paddington.
15. Miss F. Bracknbury, Ling Physical Education Association.
16. Miss Locket, Hon. Organising Secretary, East Lewisham Charity Organisation Society.
17. Miss N. Mareh, Secretary, Health and Cleanliness Council.
18. Miss W. M. Crossman, L.M.H. Settlement Worker, Cowley Estate, Lambeth.
19. Miss I. Heather, until outbreak of war Head of Cathedral Play House, Lambeth (formerly Superintendent, Trinity Infant Welfare Centre, Stratford, E.).
20. Miss Tann, H.M.I., Board of Education.
21. Mrs. Kent Parsons, M.B.E., Superintendent, Maternity and Child Welfare, Tottenham.
22. Mr. R. C. Higdon, Head Master, Hutton L.C.C. Residential School.
23. Miss M. Veith, formerly Health Visitor, Middlesbrough and Stockton-on-Tees.
24. Miss J. P. Young, Queen's Nurse, Metropolitan District.
25. Mrs. Rhces, Psychiatric Social Worker, Metropolitan Emergency Child Guidance Service.
26. Sister E. A. Thomas } L.C.C. School Nursing Sisters.
27. Sister B. M. Sticklan }

APPENDIX II

"A WORKER'S FAMILY LIFE FROM THE INSIDE"

From *The New Survey of London Life and Labour*, pub. 1934, Vol. 9.
 "Bermondsey Housewives," p. 421

I HAVE a three-roomed flat, two storeys high. I have a nice big living-room, the two bedroom doors are both in the kitchen. The two bedrooms are very nice and bright. We have also a nice view from the bedroom windows as they look out on the back gardens from the main road. I have

a nice small passage, also nice-sized scullery and bath, veranda and lavatory. From the veranda we have a very nice view also. We can look over the Docks and watch the boats pass. My rent is 1 rs. 6d., including the shed to keep a pram or coals in.

My husband is a fitter's mate. He is not always in work. Their work is fitting up heating and boilers. It depends how long the job is. Lately they have been very slack, and that means him getting a job now and again.

When my husband is at work I get about £2 3s. 0d.; out of that I pay 1 rs. 6d. rent, 2s. 10d. insurance and 2s. 6d. in club, which I am glad to have; it keeps the children tidy.

I have three children. Boy 13 years, girl 6 and girl 4.

I get up at 6.30. I get my husband's food packed as he cannot get home to dinner. Then I save him a dinner by the time he gets home in the evening. The children generally go to bed just before 8 o'clock. They are awake at 7.30 in the morning. They are washed thoroughly overnight, so it's not such a lot to do before going to school. I should very much like the boy to go into office work and the two girls I should like to do the same.

On Saturday I generally get 6 lbs. of sugar, which lasts me the week, allowing me to use some for cooking; $\frac{3}{4}$ lb. of tea; 2 lb. of 10d. butter; $\frac{1}{2}$ lb. of bacon, cut thin; 1 quartcrn of flour; 1 lb. of mixed fruit, as with the 1 lb. of mixed fruit I can make a cake and also have enough to make two boiled puddings through the week; 2 pkts. of lentils; 1 lb. of haricot beans; 1 lb. of rice and little odds and ends which I cannot think of at present. I generally get in for Sunday joint a half-leg of lamb which generally amounts to 2s. 2d. Now that goes a very long way. My husband cuts some off for Sunday's dinner very thin, with baked potatoes and greens and batter pudding, rice pudding after. Then I pack sandwiches for my husband's lunch on Monday at 1 o'clock. Then the children and I have the meat cold with fresh vegetables, cooked with tomato sauce. Then comes evening; for my husband's meal I cut some off and lay it in the saucepan with Oxo, small onion, few lentils, some beans, just enough water to cover; fresh potatoes and greens. Then I get and make him a little steamed sponge pudding, which consists of 3 tablespoons of self-raising flour, 1 egg, little milk, 1 oz. of best butter, all mixed up. Put into a greased basin with a large tablespoonful of jam and steamed. He is well satisfied with that meal, which is very cheap and cheerful. Then comes what is left of the lamb—precious little. Still I put it into a saucepan on Tuesday morning with a little fresh meat, lentils, carrots, two onions and 1d. soup powder, and that makes dinner for the children and myself, not forgetting a boiled fruit pudding which the children like. Then I get for my husband that evening a steamed meat pudding, just a small one for himself, which again is very cheap.

Wednesday we all have meat pie. I make the pastry in a large plate as one can cut it off much better. The meat is stewed separately and thickened and we all enjoy that dinner. My gas oven is very big, so while I am cooking the pastry for the pie, I make up a cake, as my husband has a piece to take every morning with him between 10 o'clock. I generally have a little pastry over; I roll that out with a little castor sugar, a few currants, cut it into little squares. The children enjoy that and at the same time it answers for "afters" that day.

Thursday dinner I generally get five small chops; make them a batter pudding, potatoes and greens; some boiled rice. Then comes Friday, which is a very short day. I get 4 lb. of potatoes, boil them with 3 large onions, 1 lb. of corned beef. I cook onions and potatoes together and when they are done I mash them together, add the corned beef, a little butter and put it into an enamel dish and bake till brown. To go with that I cook separately some butter beans and a little Bisto. We have dinner at 12 o'clock.

The children and myself have tea at 5 o'clock. My husband and I are always in bed before 10 o'clock. We have a nice bath in the flat which makes one feel glad. I mean one can wash often when they have that convenience. I was in apartments for 10 years, and when one has lived under those conditions it makes one contented to know we can use plenty of water. I have no special jobs for special days. Of course there are washing days. Generally I get the flannels done and colours on Monday morning.

On Tuesday afternoon I go to the make-and-mend class. Wednesday I go to club. They are my only outings which I call my pleasure. No public-houses get any of my money. I spend my Sundays doing less as possible. My son serves in the choir at St. — Church. The girl (six) goes also as she is a Brownie. I get dinner forward. Then I sit down and have a quiet read. Tea at 6 o'clock, clear round a little after washing up, then we have a quiet read or talk till bedtime. Very seldom go out. The boy gets back from church about 8 o'clock. Then they go to bed, and we soon follow. My husband's spare time generally gets taken up mending the shoes and boots for us all. The children and myself go away each year to the hop country.

I have been married 21 years. And I would not change with anyone. My only troubles and difficulties are : I would love to be just nice and comfortable in regards of being able to buy the children anything they need in the way of clothes or anything for their welfare.

APPENDIX III

NUTRITION

Extract from the Annual Report to the City of Birmingham Education Committee of the School Medical Officer for the year ended December 31, 1938, pp. 7-13.

IN the report for last year it was stated that efforts were being made to promote a nearer approach to uniformity of standard among the Assistant School Medical Officers in their assessment of nutrition. These efforts consisted in general discussion of the subject and the selection of three individual officers who should endeavour to define and circumscribe the limits of the various groups of the Board's classification. This was undertaken by Dr. Kemp, Dr. Stooke, and Dr. Wilkins, who were considered to be fairly representative of the various opinions commonly held upon the matter. After careful deliberation these officers arrived at the following suggested limits for the four categories of the Board's classification :

Class A.—(Excellent) should be reserved for those children who are free from defect of any kind. Special attention should be directed to certain items in the Board's description of the type—straight legs, well-formed head and chest, sound teeth set in well-shaped jaws with no overlapping or crowding, and generally erect posture.

Class B.—(Normal) should include all those children whose *present* general physical condition and state of well-being are good. They need not be entirely free from such defects as are attributable to illness, defective nutrition and other factors *acting in the past*. To qualify for Class B, such defects as do exist must be well compensated, either by subsequent growth and development, or by treatment to a sufficient extent to be negligible from the standpoint of present and future health and well-being. If a child's condition is such that, in the opinion of the Medical Officer, treatment or improvement of the environment should effect

a noticeable betterment in health, this should be sufficient to disqualify from this category.

Class C.—(Slightly sub-normal)—In this class should be placed those whose state of health or functional well-being is slightly impaired. The condition of these children requires, and is susceptible of, only slight improvement.

Class D.—(Bad)—Here should be placed all those for whom "slightly sub-normal" is felt to be too high an assessment. The condition of such children requires a degree of improvement which is more than "slight".

It was felt that the distinction between "slight" and "bad" malnutrition was too vague and that it might have been better to have a third class between the two.

During the year 1938, 43,507 children were examined at routine inspections in the schools, and their nutritional state was classified as follows :

	Per cent.
A (Excellent nutrition)	2.3
B (Normal nutrition)	86.9
C (Slightly sub-normal nutrition)	9.4
D (Bad nutrition)	1.4

This shows a total of 10.8 per cent. of the children examined to be suffering from some degree of malnutrition as compared with 17 per cent. in the same condition in the previous year.

Again it is necessary to separate from the whole the findings of one Assistant School Medical Officer. This Medical Officer examined 3,567 children, finding 48 per cent. slightly sub-normal in nutrition, and 12.5 per cent. "bad". In the previous year he classified as "bad" 24.4 per cent. of the children examined by him. If we exclude his figure as being dependent upon a standard entirely individual, we arrive at the following classification, which may be taken as a much more reliable indication of the position in Birmingham as compared with the rest of the country.

Number of children examined	39,940
Number classified as :	
	Per cent.
A (Excellent nutrition)	2.5
B (Normal nutrition)	91.0
C (Slightly sub-normal nutrition)	6.0
D (Bad nutrition)	0.5

Total percentage whose nutrition was classified as below normal—6.5 per cent.

The more one investigates the subject of nutrition, the more is one impressed by the practical value of the classification devised by the Board. Malnutrition must be considered from two chief points of view. First, it is a field for scientific research along a great variety of paths. Second, it is a clinical problem demanding the exercise of all the knowledge and professional acumen of the medical practitioner. The correct placing of the individual child in the appropriate one of the Board's four classes is the doctor's answer to the parent's anxious query, "Is my child well, or, if not, is he very bad?" If the school doctor cannot answer this plain and very important question with a fair degree of accuracy, he or she fails as a medical practitioner. That the majority do not fail and that the classification is of practical utility seems borne out by the fairly consistent returns for the whole country year after year.

Ascertainment of malnutrition, however, is not enough. It would be worse than a waste of time if it did not lead to and direct appropriate action. In order to decide along what lines any necessary action should be taken,

it seemed essential to investigate, as far as possible, the chief causes of the states of malnutrition in our children. Throughout 1938, therefore, an analysis has been made by each Assistant School Medical Officer of the conditions causing, or contributory to, malnutrition of any degree, whether slight or bad.

To facilitate this, a scheme was adopted by which factors operating to the detriment of the child's nutrition were grouped under the following heads:

1. Pathological.
2. Social.
3. Dietetic.
4. Financial.

The scope of these various groups and their application demand a few words of explanation:

Pathological.—In this group are included cases in which the sub-normal nutrition is dependent upon illness, present, recently past, or frequently recurring.

Social.—Here the chief factors are habits, home conditions and mode of life, e.g., irregular meal times, inadequate sleep, exercise, etc.

Dietetic.—Food inadequate in quality from faults in choice or preparation, although money may be sufficient.

Financial.—Here lack of money is the essential cause.

There will be, doubtless, immediate criticisms of the scheme by many on the ground that the groups are arbitrary and that in many individual cases more factors than one may be found in operation.

All this is perfectly true, and yet the objection is not so cogent as it appears. Most clinical problems are of similar complexity and present a comparable variety of lines of approach. To succeed in his attack upon the malnutrition of any child, the doctor must recognise, and if possible eliminate, all causal factors, but must be able to decide which is of primary importance. Idle to provide extra food in a financially secure home when asthma or recurrent bronchitis is the root cause of the sub-normal condition; equally fruitless to employ ultra-violet radiation when, through lack of money, there is not sufficient food available.

The results of the analysis are given in the following table:

A. NUMBER OF CHILDREN EXAMINED DURING THE YEAR AND CLASSIFIED AS:

	Routine Examination.	Special Examination.	Total.
Slightly sub-normal	2,712	837	3,549
Bad	442	152	594
	<u>3,154</u>	<u>989</u>	<u>4,143</u>

B. ANALYSIS OF APPARENT CAUSES:

		Per cent.		Per cent.	
Slightly sub-normal Nutrition.	{ Pathological	1,128	41.6	230	27.5
	{ Social	522	19.2	110	13.1
	{ Dietetic	351	12.9	27	3.2
	{ Financial	711	26.3	470	56.2
Total number classified as slightly sub-normal		<u>2,712</u>		<u>837</u>	<u>3,549</u>

		Per cent.		Per cent.	
Bad Nutrition.	{ Pathological	93	21.1	15	9.9
	{ Social	21	4.8	4	2.6
	{ Dietetic	48	10.9	7	4.6
	{ Financial	280	63.2	126	82.9
Total number classified as bad		<u>442</u>		<u>152</u>	<u>594</u>
Grand Totals		<u>3,154</u>		<u>989</u>	<u>4,143</u>

The investigation of 3,154 cases examined at routine inspection and found to present some degree of malnutrition showed that 991 or 31·4 per cent. were considered to be due to financial causes, while 1,221 or 38·7 per cent. were judged to be pathological in origin.

It will be noted that there is a marked preponderance of cases showing "financial" causes amongst those examined at special inspections. This is because there were included here all those children who were examined for the provision of free meals. Not all the special examinations were for this purpose, and among those with slight degrees of malnutrition the pathological factor is considerable. These would be chiefly children examined at the instigation of teachers and attendance officers. In the conduct of this analysis, the Assistant School Medical Officers have done a great deal of careful and painstaking work. The following are extracts from the notes of some of the Assistant School Medical Officers :

DRS. STOOKE AND MACLEAN. Class C—236 ; D—4 ; Total 240.

Incidence high in two parts of this district :

1. A poor town area with low and variable incomes.
2. Outside boundary of new housing district, with high expenses for travelling and rental ; also many unemployed.

Cause—mainly pathological—bronchitis, asthma, endocrine deficiency, acidosis.

In many cases *pathological and financial* overlap.

DR. KING. Class C—455 ; D—19 ; Total 474.

Social : A complex group—

1. Low social status and ignorance.
2. Lack of interest and carelessness.
3. Spoilt only children.
4. Broken homes and an only parent or both parents working.
5. A small group in which the cause seemed mainly in the abnormal psychology of the child itself.

In many of these groups there is usually an associated dietetic factor, but social seems the main cause.

Financial.—This is not so important a factor as it would be if there were no provision of meals. It only becomes important in those cases where meals are refused or where for some reason such as sickness or accident in the family there is an abnormal drain on resources. Most marked in the Junior School.

Nutritional state seems worse among boys than girls, attributed to less parental control in boys, so that greater physical exhaustion occurs.

DR. ALEXANDER.—Total 312.

Class C—slightly sub-normal nutrition	.	.	.	257
Class D—bad nutrition	.	.	.	55
			Total	<u>312</u>
				Per cent.
Pathological	.	.	.	193
Social	.	.	.	65
Dietetic	.	.	.	12
Financial	.	.	.	42
				<u>312</u>

In the pathological group, Dr. Alexander found a number of children whose malnutrition could not be traced to any definite cause. As the majority of the parents put it, they had "always been thin". Many of them came from good homes where food was plentiful and where children had

extra nourishment, *e.g.* cod liver oil. It was possibly the result of past illness, perhaps quite early in life, with resultant lowering of vitality through temporary derangement of glands regulating growth and development.

Regarding social causes, Dr. Alexander comments forcibly upon the essential need for sleep and the disregard of this matter of hygiene in a quite substantial number of the children affected. In a smaller group overcrowding was the prominent factor.

Where dietetic faults were considered of prime importance, it was obvious from the information given by the parents that the children were not receiving the proper quality of food, "pieces" and biscuits taking the place of proper meals.

Almost three-quarters of the children in the "financial" group were in receipt of free meals. The parents of the remainder preferred to "manage" on their meagre resources. All were invited to apply for school dinners.

DR. BENSON. Class C—1,026; D—19; Total 1,045.

With regard to sex, the only characteristic distribution was in the pathological group, there being a definitely larger number of boys at "entrant" age and a preponderance of girls among the "leavers". It seemed definite that there was increased incidence of illhealth among infant boys and in girls approaching puberty.

The impression was gathered that financial causes loomed larger in the background than could honestly be shown in statistics without more detailed investigation than was possible in this analysis. The difficulty in proving poverty to be the cause in many borderline cases, where there is intermittent unemployment, suggests the expediency of provision of meals for payment. This has been encouraged, too, in cases where both parents go out to work.

INFERENCE FROM ANALYSIS

1. That while several factors are operative in the production of malnutrition among our children, the most powerful are shortage of food, due to lack of means, and illness, present or past.
2. The position will not be met by the provision of food alone.
3. Those due to financial causes call for provision of extra nourishment, free or at reduced cost according to the degree of financial stringency present.
4. The pathological group provides a justification of the authority's health activities in the schools—consultations at clinics, attention to teeth, provision of ultra-violet rays and open-air schools, etc.
5. In individual cases, many of them, both these chief factors may be found affecting the child's nutrition in varying degrees.
6. For these children both lines of remedy will be necessary—as notably in open-air schools. But this group seems to furnish a particular argument in favour of the provision of free milk apart from free solid meals where the income is slightly above the free meals scale.
7. There is a composite group where the chief causes are social and dietetic. The most potent among the social factors is lack of sleep, which results from a variety of causes, most of which are difficult to eradicate. Social causes are found in greatest numbers in the "slightly sub-normal" group, but they are of considerable importance since the condition is steadily cumulative if unchecked. For the remedy here, it seems that we must depend upon the teaching in school of general hygiene and cookery and the activities of our clinics in supervising the health of the children.
8. The milk in schools scheme seems to grow in value the more one looks

at the numbers in these groups. This is not a direct inference from the analysis. While not sufficient in itself to meet the case in severe malnutrition, daily milk might reclaim borderline individuals, would greatly assist convalescents and slight pathological cases, and would enable the normal to establish a more sound reserve of health and a wider margin of safety.

APPENDIX IV

NURSERY CLASSES AND NURSERY SCHOOLS

THE 1937 Report of the School Medical Officer of the London County Council contains an interesting comparison over a year of the children in :

- (I) a nursery class and an ordinary babies' class in an infants' school, and
- (II) a nursery class and a nursery school.

(I) The nursery and the control class were in adjacent classrooms giving on the same playground which was used freely by both, and the equipment provided was similar. The nursery class had the following advantages :

1. Daily attendance by the school nurse with examination and treatment of minor ailments.
2. Daily toilet and lavatory drill.
3. " Meals " at a cost of $7\frac{1}{4}d.$ a week, consisting of a mid-morning meal of milk, rusk and cod liver oil, and an afternoon meal of milk.
4. Individual clean overalls twice weekly and individual blankets for the afternoon rest.
5. Facilities for a weekly bath.
6. Hygiene instruction to parents in a monthly social and educational meeting.

Only 20 per cent. of either class had good homes ; 43 per cent. of the nursery class and 33 per cent. of the control class had unsatisfactory homes.

The children of the nursery class were, when admitted, nearly a kilogram below the London average standard weight and entrants to the control class 0.4 kilogram below. In a year the average weight of both classes rose to slightly above the general London standard.

Illnesses.				Nursery Class.	Control Class.
Colds and sore throats .	.	.	.	24	51
Whooping cough .	.	.	.	1	10
Mumps .	.	.	.	5	3
Other infectious illnesses .	.	.	.	2	3
Total	.	.	.	<u>32</u>	<u>67</u>

(II) A comparison over a year between children in a nursery class and in an open-air nursery school was carried out on two groups each of 46 children.

Home visits showed that 50 per cent. of the children in the nursery class group and all the children in the nursery school group were living under conditions unsuitable for the proper mental and physical development of children from 2-5 years.

The nursery school group had unlimited space and fresh air, good food, adequate mid-day sleep and suitable companionship continuously from 8.30 to 4.30 ; 82 per cent. of the group had three weeks' summer holiday at the sea or in the country under ideal conditions.

		Nursery School.	Nursery Class.
Average gain in weight .	.	2.53 kg.	1.98 kg.
" " " height .	.	6.42 cm.	6.13 cm.

The nursery school children, having had medical and dental supervision for two years, were all free from dental decay ; 52 per cent. of the nursery class children suffered from dental caries and 56 per cent. received dental treatment during the year.

The nursery school group had eight cases of colds and sore throats and the nursery class group 17. The total number of cases of infectious disease were 12 and 22 respectively.

From a careful study of individual records, the conclusion was reached that the nursery school can largely compensate a child for an unsatisfactory home, whereas the nursery class merely represents an improved method of handling children from homes which are satisfactory.

APPENDIX V

NOTE ON THE MEMORANDUM OF EVIDENCE SUBMITTED BY THE ASSOCIATION OF THE TEACHERS OF DOMESTIC SUBJECTS TO THE BOARD OF EDUCATION'S DEPARTMENTAL COMMITTEE ON DOMESTIC SUBJECTS IN PUBLIC ELEMENTARY SCHOOLS

THE Memorandum states that the total amount of time given to Housecraft varies enormously, according mainly to the accommodation and personnel available. It adds :

"It is scarcely necessary to state that for one reason or another there are still large numbers of girls attending elementary schools who are receiving little or no instruction in Housecraft."

It considers that it should be possible for all senior girls to receive instruction in Home Organisation in suitably equipped premises in addition to instruction in Cookery, Laundry Work and allied Housewifery and that a minimum course of three hundred hours should be provided for all senior girls.

Other recommendations are :

"That the syllabuses should be related to the social and environmental conditions of the pupils, but should also aim at widening their horizon."

"That where circumstances permit boys might receive some part of their practical training in the Housecraft Room and the girls have the advantage of a course of instruction in the Handicraft Room."

"That the teachers should possess a knowledge of the home conditions of their pupils."

"That the co-operation of the parents should be enlisted."

"That adequate supplies should be available for all the girls to do individual practical cookery in connection with the lessons of the day even if they do not bring materials from home or buy the cooked dishes."

"That the Board of Education should take more definite steps to see that all Authorities carry out their responsibilities as to arrangements for the provision of materials and the disposal of articles produced."

The Memorandum suggests that boys and girls should have more instruction in the management of tots, for whose care in the home they are often responsible for many hours in the week, and that the activities of the older children should be related to the needs of the younger children in the school.

It suggests that the time is coming when, as is already the case in some secondary day schools, a Matron Housekeeper will be appointed to large senior schools, who would superintend the provision of meals, supervise the

work of the domestic staff, run the sick bay, attend to minor accidents, etc. An appointment of this kind is regarded as particularly valuable in boys' schools where these duties cannot readily be undertaken by the staff.

As regards the provision of materials for Cookery and Laundry, the Association ask that the Board of Education should request every Education Authority to make a thorough investigation of the situation in each school or centre under its care, and, when the facts are known, take appropriate action with the assistance and advice of the Head Teachers and Housecraft Teachers concerned, and that the question of making allowances for Cookery materials as is done in the case of other school requisites should be considered.

The Association considers that provision should be made for materials to be supplied free of charge where they are of such a nature that the poorer children cannot afford to bring them.

The Association stresses the need for all teachers to have copies of instructions setting out the Education Authority's directions in this matter.

APPENDIX VI

NOTES FROM A CORRESPONDENT ON PROBLEM FAMILIES : EXAMPLES OF CASES PROSECUTED AT THE INSTANCE OF THE N.S.P.C.C. ; ONE OR BOTH PARENTS SENTENCED TO IMPRISONMENT

It is not suggested that, with their present facilities, the N.S.P.C.C. inspectors exceed their duty, for in every case prosecuted the children were grossly neglected ; but there is ample evidence that where children are grossly neglected, one or both parents, usually the mother, is suffering from some serious mental or physical defect, probably both. If it were possible for a complete medical examination of the parents to be made by a doctor competent in both mental and physical disease, evidence would be obtained to form a satisfactory basis for dealing with the case. Only too often after imprisonment the parents return home, their children, who have probably been in the Poor Law Cottage Homes, are returned to them, and in a short time, sometimes a matter of months, conditions are as bad as ever.

A woman doctor (Dr. X.), interested in psychological medicine, has suggested that every school clinic should include a department for a complete examination of all the facts surrounding the life of the problem child ; this complete examination should include a full medical examination of both parents.

Below I give examples to illustrate the point.

A. Both parents sentenced to imprisonment. Father, fair type, works when he can get it. Mother aged thirty-eight, had nine children, eight of whom survive ; had had all teeth extracted three years previously, unable to pay for new dentures, has goitre for which her doctor had frequently advised operation.

B. Both parents sentenced to imprisonment. Both man and woman are a very poor type mentally and physically. The Health Visitor's comment on the case is " Mrs. B. suffers severely from asthma. I have often seen her blue with it." Large family.

C. Father only sentenced to imprisonment. Mother was not sentenced because her mental condition was obvious to the magistrates. Even so the bench did not order a medical examination, and at present she and the children are in one of the Poor Law Institutions, father being in the army. There is nothing to prevent Mrs. C. taking her discharge at any time and taking the children with her.

APPENDIX VII

CLOTHING CLUBS

In a Midland district clothing clubs can be sub-divided as follows :

A. *Clubs run by shopowners for purchases to be made at their own shops.*

1. *Local, i.e. by small shopkeepers.*—Generally speaking, the method adopted in this type of clothing club is designed primarily to attract trade to a particular shop, the owner of which runs the club. A member of such a club pays weekly a certain amount, not normally less than 6d., for twenty weeks. If 6d. is paid a check for 10s. is issued, if 1s. is paid a check for 20s. is issued.

This check may be issued immediately after the commencement of the club or during the intervening period, or after the twenty weeks are completed, according to the reputation of the member. In most cases checks are issued in the early stages, thus providing an immediate source of supply of goods, in exchange for a continuing weekly payment. If the check is issued at the end of the twenty weeks the club merely amounts to a savings club.

In clubs of this nature purchases are restricted to the shops of the club owner, and in some cases to certain types of articles, *e.g.* clothing, boots and shoes, coal. The profit is derived from the normal profits on the goods.

Observation.—The following disadvantages attach to clubs run by small shops :

A limited choice of goods.

The possibility of inferior goods being supplied to club members, since the club members are known to the shopkeeper.

The possibility of higher prices to club members.

The possibility of having to pay a premium, though this is not usual.

2. *Extended area :*

(a) *Multiple shops.*—This type of club is a recent development by multiple shops, probably to counteract the effects of mail order firms.

The method adopted in this case is as follows :

The firm appoints an agent, who forms a small club ranging up to twenty members or perhaps more. Each member pays 6d. upwards each week for twenty weeks. A ballot is held to decide the order in which members will receive the checks. The money is paid in weekly by the agent, who receives a check which he hands to the member whose turn it is. The members who are fortunate in the ballot receive their check and consequently the goods in advance, and continue to pay until the end of the twenty weeks. They receive a check for 20s. for each 1s. paid per week. The rest of the members draw their checks in turn until the end of the cycle is reached.

Purchases are, of course, confined to the branch or firm which organises the club, and the goods supplied vary according to the type of business carried on by the firm. Articles of all classes and descriptions can be purchased in these shops.

Again, in this case, normally no additional profit is made by the firm. The profit is the usual one obtained from the goods. The

gain to the firm is the steady volume of business obtained by means of these clubs.

Observation.—The main disadvantage of clubs run by multiple shops is that the stock usually carried by these shops is sometimes more attractive than useful and the choice is limited to the particular type of goods sold by the firm.

(b) *Co-operative Societies.*—Clubs run by Co-operative Societies serve a useful function. The "Mutuality" Clubs (through which the purchaser can procure furniture as well as clothes) supply urgent needs on a system of deferred payment, and to some extent act as savings clubs.

Observation.—It is difficult to see any drawbacks from the members' point of view. They draw their dividends as if they paid cash down, and they have a full choice from the whole stock. Further, members of these clubs are members of the Co-operative Society and normally shop at the Stores, so that compulsory purchase of the Co-operative Societies' goods is not any disadvantage.

B. *Clubs run by Voluntary Organisations, Churches, etc.*

These are a form of savings club working on the following principle :

A weekly subscription (varying from 3d. to 1s. 6d. or even 2s.) is made by voluntary members to a Committee appointed by the Church or Chapel. Checks are not anticipated but are handed out when the club finishes, usually about Christmas. The clubs are annual in character. The check is drawn on one of a list of drapers who agree to give a certain discount on purchases. In addition, the Church itself adds a small bonus to the amount paid in. These clubs fluctuate considerably in number and extent. Some have an ephemeral existence, while others are long established.

C. *Clubs run by companies for the purpose of providing credit.*

The companies who run this type of clothing club do not appear to have any direct interest in the ownership of the shops at which their checks can be cashed. Their profit is mostly derived from commission drawn from the shopkeepers.

A former superintendent of one of these large clothing clubs has given the following information :

1. Clothing clubs receive a commission of 17½ per cent. from the shops where purchases are made, *i.e.* for each pound voucher issued the clothing club pays to the shopkeeper 16s. 6d.
2. There is no truth in the suggestion that inferior goods are sold to club members, but it is a fact they pay more for the goods purchased. It appears that all shops dealing with clothing clubs set a higher retail price on the article in order to part cover the commission allowed. Persons purchasing for cash from these shops are sometimes asked to pay the higher retail price set on the goods by the shopkeepers.
3. When a member has paid his first instalment of 1s. in the pound to the clothing club, the voucher to the value in pounds he requires is issued immediately. If the goods are not purchased, or are returned undamaged, payments are not refunded complete. This is a matter to be settled between the purchaser and the shopkeeper.
4. Only about 2 per cent. of the members fail to keep up their payments, because the clothing clubs make every endeavour to collect some amount, however small. Where a member is in employment and

refuses to pay he is sued at the County Court on behalf of the clothing club.

Generally speaking, but not always, a premium is charged, normally 1s. in the pound, to the members where the check is taken in advance of the completion of the payments. One very large undertaking does not charge a premium if the check is not taken until after six payments have been made.

The contributions are collected by agents who are either full time or spare time, and who are paid on a commission basis.

The system adopted is substantially the same as that used by the Co-operative Society, etc. (see A. 2 (b) above). Where a premium is payable the member pays 21s. for £1 check. The amount of the check can be increased if desired, normally in multiples of £1, by payments of proportionately increased multiples of 1s. each week, according to the class and financial position of the customer.

The profits to the companies, whose business would seem to be fundamentally a modified form of lending money, is the commission received from traders. The agent gets the premium.

Each firm has an extensive list of shopkeepers in each town covering all types of goods, ranging from clothing, shoes and all classes of apparel, to furniture, coal, railway tickets, etc.

Some of these firms are very large, and cover an extensive area, but they normally specialise in cheap stock.

Observation.—The premium payable is onerous and there is danger of enhanced prices and special inferior stock for club customers when they get known by the shopkeeper.

Another disadvantage of this type of club is that, in some cases, club checks are accepted as deposits on wireless sets, furniture, and other luxury articles, the balance to be paid weekly on hire purchase. This no doubt encourages the incurring of liability and increased weekly payments which, in some cases, go beyond the means of customers, because it makes easy the deposit, which is generally the difficult part of the transaction.

APPENDIX VIII

UNCLEANLINESS IN LONDON ELEMENTARY SCHOOLS AS SHOWN IN THE REPORT OF THE CHIEF MEDICAL OFFICER FOR SCHOOLS, 1938

The following details illustrate the treatment of this subject :

1. On page 9, under the heading "Medical Inspection," it is stated that the percentage found free from nits or lice in the hair at routine medical inspections was 97·7 compared with 97·4 in 1937 and 1936 and 97·0 in 1935. Progress has been from 67·2 in 1915. The percentage of 11-year-old girls taken as the index in this matter was 96·8 in 1938, *thus establishing a new high level*. A warning follows as to the fallibility of figures obtained on the basis of these pre-arranged inspections.

2. On page 31, under the heading "Personal Hygiene Scheme," it is stated that each school nurse has a group of schools which she visits on a rota. Every child in each school is inspected for personal hygiene once a term, and oftener in schools where conditions are bad. In 1938, 1,463,634 individual examinations were made, and in 106,299 instances or 7·3 per cent. of the examinations the child was noted as verminous. The number of individual children found unclean was 65,292. About 47 per cent. of the cases in which verminous conditions were recorded were stated to be infested at the time of examination with nits only. 63,975 individual children

attended the bathing and head cleansing centres, not all of whom were reported by the school nurses ; some went voluntarily, *e.g.* before going to holiday camps or residential schools. 22,363 children attended head-cleansing centres (the relation of this figure to the above is not clear, but it apparently relates to a special type of centre).

3. On page 72, Table (c) (a prescribed table) shows :

(a) Average number of visits per school made by school nurse	6
(b) Examinations of children in the schools by school nurse	1,463,634
(c) Number of verminous children noted	65,292
(d) Children cleansed under the Council's arrangement	63,975 ¹
(e) Cases of legal proceedings under the Education Act, 1921, section 87	195

¹ Excludes 15,399 compulsory cleansings.

4. On page 6 the average attendance in elementary schools for 1937-8 is given as 397,172.

The authors make the following deductions :

- (1) The percentage of all individual children in attendance at the elementary schools found unclean was 16·4.
- (2) The number of children who attended voluntarily or otherwise at cleansing stations was almost as great as the total number found unclean. If compulsory cleansings are taken into account, the part played by the home appears small.
- (3) The percentage of nurses' ascertainments which led to compulsory cleansing was approximately 14·5, a figure which seems extremely high. The number of children involved cannot be learned from the report.
- (4) 56,339, or 53 per cent. of nurses' ascertainments, showed live vermin. The number of children involved does not appear. This percentage is consistent with Dr. Mellanby's findings, but nothing approaching it has been found in the other reports examined. It appears to denote a superior standard of examination in London.
- (5) The routine medical inspection of 3 groups showed an uncleanliness figure of 2·3 per cent. compared with a figure of 16·4 per cent., *seven times as high*, disclosed for all children by nurses' visits.
- (6) No figures are given for girls alone. They would be much higher than those for both sexes.
- (7) No analytical figures are given for schools of different types or in different neighbourhoods. The figures for the poorer schools must be very high in order to produce such substantial figures in the average. There can be little doubt that the figures relating to girls in the poorer schools would be gravely shocking to public opinion.
- (8) The whole facts are nowhere summarised. The statistics are dispersed and difficult to understand ; the method of presenting them has in all cases the effect of minimising the gravity of the problem.

APPENDIX IX

SOME NOTES ON HEALTH VISITORS' WORK IN CONNECTION WITH
PEDICULOSIS

By H. S. Cooper Hodgson, M.B.E., formerly County Superintendent
Health Visitor, Durham

PEDICULOSIS

Method of Marking.—A clear method of marking is essential if a true picture of the state of a particular school is to be ascertained. The following method will be found useful :

VN††† . VN†† . VN† . N††† . N†† . N† . N.

No child must be marked clean if it has even one nit. To parents this is sometimes a hard saying ; they complain bitterly " such a fuss about a few nits," forgetting that a nit was laid by a louse and if not removed will develop into a louse.

Reasons for Persistence of Condition.—(a) Superficial examination is one of the great causes of the persistence of this condition.

As infestation is now much less gross, a *lengthy* and careful examination of each head is necessary. No one can examine a head properly by flicking over the hair with a pencil or comb. The officer should direct girls to undo plaits and remove slides, ribbons and combs ; she should, using her hands, begin the examination of the head at one ear and go carefully over the hair at the nape of the neck to the other ear, finishing by examining where the hair has been confined by a slide, *i.e.* nits are usually found behind the ears or in the nape, live vermin tend to seek cover under a ribbon or slide ; any woman who is afraid to use her hands to examine the child's hair is unfit for her duties. It is unnecessary for the examiner to wash her hands or put them in disinfectant between examinations, such a procedure causes chapping of the hands and spreads infection instead of reducing it ; the examiner should wash her hands after examining anything infectious, *e.g.* ringworm, impetigo or an actual verminous head, and always between classes, *e.g.* after examining forty or fifty girls.

(b) Neglect of mother or those in charge of child to use an efficient, *i.e.* a metal, nit comb regularly every night before the child goes to bed. An experienced health visitor or school nurse during a home visit in connection with dirty heads invariably asks to see the nit comb ; in the majority of cases a celluloid comb is produced, the teeth of which are clogged with hair and scurf ; attempts to clean them with a pin have resulted in teeth being broken and rendered inefficient ; these combs cost from 3*d.* to 6*d.* each, and many families cannot afford to replace them week by week ; and they can seldom bring themselves to save 2*s.* or 2*s.* 6*d.* necessary for the purchase of a metal nit comb.

(c) The presence in every school of a few families who in the parlance of teachers, school nurses and health visitors are " always on the dirty head list."

Theoretically the parents should be prosecuted for allowing their children to be in a verminous condition, but on closer investigation it is found that health visitors and school nurses advance excuses against prosecution : " The mother has such bad sight she cannot see to do Mary's hair," or " has such a big family," or " has a very bad heart " ; but the primary cause of the persistence of dirty conditions among school children is the presence of a derelict family.

All social workers know what is implied by this description, a family of

children grossly and persistently neglected because of the unfitness of one or both parents, usually the mother, to have care of children. The children in such a family are always ragged and dirty, have verminous heads and sometimes verminous bodies; the following up at home reveals dirt and neglect; if there is any decent bedding it is usually on the parents' bed, the children's accommodation being a filthy, holey flock bed or palliasse, flock or straw protruding on to the floor, and soaked with urine; the bed clothing is usually old coats or bits of old carpet; there are no sheets or pillow cases; the pillow ticking is usually grimy after months of use by unclean heads and much stained from discharging and sore eyes, running ears, etc.; persistent bed wetting is due to the absence of a chamber. Young adults do not usually require to urinate during the night, and forget that children do, particularly if the latter are kept up late at night and allowed to eat and drink all kinds of unsuitable things just before going to bed.

As we all know, the average parents want their children to be as clean and well clad as their neighbours; the trouble is that the parents of derelict families are not "average". Something has gone wrong in the early life of, say, the mother, rendering her incapable of being an efficient parent. In many cases the mother will tell you: "Oh, I never went to school, I was too delicate." Whatever the cause of this "delicacy" it did not prevent her marrying early and having a large number of children. In some cases the mother may have been a happy, normal child and had a bad illness or series of illnesses, or a very bad accident, which transformed her into a spineless adult. Some of them have had all their teeth extracted at the age of about twenty-one years, were unable to afford dentures and have gone on producing a child every year for nine or ten years. Such families are the despair of social workers, N.S.P.C.C. inspectors, education authorities and health departments, and they were undoubtedly responsible for the obloquy thrown upon the sterling artisan class of this country by the revelations about dirt, vermin and disgusting habits of life at the September evacuation, 1939.

Method of follow-up in County Durham.—The heads of all girls are examined as soon as possible after the beginning of the year; the names of those showing nits or worse are entered on a list and they are re-examined seven times during the year. In normal times numerous notices are sent by post to the parents of unclean children; at present, owing to the cost of postage, paper, etc., fewer notices are being sent. The Health Visitor visits the home of every child on the list, and subsequently pays five re-visits if the child remains unclean to the end of the inspection; this has the effect of keeping unclean children under supervision practically the whole of the year. When head to head inspections commenced here about thirty years ago, out of every hundred girls examined seventy had unclean heads. In 1939 the percentage of girls with clean heads was 81.4; in this year Health Visitors paid 17,985 home visits to advise parents about the cleanliness of their children.

SUGGESTIONS

1. All homes of girls with unclean heads should be visited by the Health Visitor or school nurse, who should invariably ask to see the nit comb which is being used. The number of cases in which either no comb is produced or only an inefficient one with broken teeth should be reported to the School Medical Officer, and by him to the Education Committee; already some head teachers and Health Visitors voluntarily buy metal nit combs and loan them out or allow parents to pay a few coppers a week until the comb is paid for. This is a great help to poorer people. It is to be hoped the Ministry of Supply will see to it that the shortage of metal will not result in the metal nit comb going off the market.

2. When, as not infrequently happens, the Health Visitor has, over a period of two or three years, paid at least twenty visits to advise the mother about the cleanliness of her children and results are still unsatisfactory, *somebody ought to do something about it.*

DERELICT FAMILIES—SUGGESTED PROCEEDINGS UNDER THE CHILDREN AND YOUNG PERSONS ACT, 1933

Section 1 states that "if any person . . . who has the custody of any child or young person . . . neglects him, that person shall be guilty of a misdemeanour". If the children who are persistently dirty and verminous, and particularly the children in "derelict families", could be brought before magistrates including women who are interested in child life, and if the School Medical Officer, Health Visitor, N.S.P.C.C. Inspectors, School Attendance Officers, Relieving Officer and other social workers having knowledge of the case could all attend to give evidence, the magistrate might be able to do valuable work in connection with the care of children. Some local education authorities have instituted proceedings under this section. The N.S.P.C.C. is only able to bring before the Court very gross cases of neglect; the Society appears to have no present means of obtaining a full history of the parents, including a medical examination of the mother. Parents may be, and generally are, sent to prison for a few months, but because the root cause is not detected and remedied, conditions often go on as before without amelioration of the children's lot, and without removing the source of gross infection at elementary schools. What appears to be needed is a more liberal interpretation of the law and a detailed study under the direction of the Ministry of Health. Such a study would include the parents' school and health history, working capacity of the father, the mother's childbearing history, housing, a complete medical examination of parents and all living children and other details relating to the family.

The greater part of this study would have to be completed by the Health Visitor or school nurse. All school nurses should hold the Health Visitor's certificate. The present Health Visitors' training should be amplified to include a considerable period of training in social work. Apart from the question of preventing uncleanness, this business of doing social justice to derelict families is extremely important. It is easy to describe them as coming from bad stock, and so washing one's hands of them. But this gets the nation nowhere. Improved social conditions have made it easy for the socially inefficient to live and rear large families. It is true that in some derelict families parents actually are missed congenital mental defectives, but experience shows that in large numbers of cases defects leading to social inefficiency are remediable, and would be remedied if those in authority were in a position to take the necessary steps.

APPENDIX X

PROBLEMS OF CHARACTER

Constructive Treatment of Slum Character in Vienna, 1920-1933, by the Municipality

1. THE new dwellings were let to tenants who were likely to keep them in good order. Families with a low standard of cleanliness or behaviour were rehoused in old tenements which had been carefully reconditioned and were looked after, as regards repair and redecoration, with more attention than the new dwellings.

2. Between 1918 and 1931, kindergartens were established throughout the city by the municipality for poor, ill or unhappy children under school age. During this period, the number owned by the city increased from 57 to 111, and contained 9,600 children between 3 and 6 years of age. Only 48 of these schools were on new housing estates, 27 were in special municipal buildings, 29 in existing schools, 7 in private houses; for it was realised that children still in bad housing or social conditions needed the schools even more than the children in the new estates.

The accomplishments required in the teachers included such diverse things as guitar playing and gymnastics, and the children, who were in school from 7 A.M. to 6 P.M. and were under close medical supervision, were taught the things which many of them lacked in their own homes, such as order, a community spirit, independence, pleasure in work and play, and cleanliness.

Parents' Associations existed at each kindergarten to reinforce and help the teachers. Regular discussion meetings were often arranged between the parents and the teachers of each small group, while parents often helped to make or mend the toys. Many kindergartens held an annual exhibition at which the work both of children and of parents was shown. In this way parents were kept closely in touch with their children's needs and development, and indirectly they learned the lessons which were being taught to their children. The municipality and independent observers united in claiming that standards of behaviour in the least satisfactory "slum" homes were raised with less friction and greater permanence by these means than by any others.

Constructive Treatment in some Italian Cities, 1918-1938

When a slum area is cleared, those families who are considered unsatisfactory as tenants for new dwellings—either from poverty, low personal standards, or criminal records—are offered cheap accommodation in palatially designed, municipally owned "hotels", which consist of one-room apartments with certain communal facilities, in particular, infant schools, in the building.

Rents are nominal, and arrears of rent often overlooked in these apartments. But attendance of mothers at the infant welfare centres and of children under four years of age at the nursery schools is said to be compulsory. In these "hotels", centres and schools, the colour and design, the decoration and equipment are carefully chosen and very attractive; a normal standard of behaviour and cleanliness is expected and enforced; the parents are encouraged to come and see what their children are doing. The authorities have found that a rough and dirty woman of independent spirit will rarely take outside advice on the running of her home, but if her own children want and expect cleanliness, order, higher standards of living, she will exert herself to comply, and so protect herself from criticism. They claim, and with considerable evidence, that they are cutting the slum mind off at its root at the lowest expenditure of time, money and energy.

ELIZABETH DENBY.

(Summarised from *Europe Rehoused*.)

APPENDIX XI

RESULTS OF SCHOOL MEDICAL INSPECTION IN AYLESHAM, KENT

Extract from the Report of the School Medical Officer, 1934, pp. 59-62.

BY DR. F. WOLVERSON

THE beneficial results of the system of school medical inspection as practised in this country for some years are accepted by all who are in a position to judge. Apart from the dry bones of statistics, as they exist, anyone engaged in work among school children during the last twenty years cannot fail to be impressed by the living evidence seen in the schools themselves. The general appearance of the children as regards nutrition, cleanliness, clothing, boots, and well-being to-day is very different from these conditions as they were observed in pre-war days—and after crediting the general augmentation of wages and the existence of out-of-work pay, it is quite certain that medical inspection by its insistence on periodical examination, its remedying of minor defects, its discovery of major pathological conditions and its influence on the attitude of parents towards these defects is largely responsible for the improvement. In the case of Aylesham School it is possible to see its results more clearly, as like the village itself it has only been in existence for a very few years.

Aylesham did not exist eight years ago. There are now from four to five thousand people living in new houses on the local estate and one thousand children attending the three departments of the village school.

The people who constitute this new community come from all parts of the British Isles (Scotland, Ireland and Wales), and from most of the counties of England.

As the mines have developed, families have arrived and in many cases have migrated from depressed areas because the wage-earner failed either to get or to keep his employment. These come mostly without any means and for some weeks, even if they get immediate work, they are in a condition of poverty from which they do not soon, if ever, completely recover. Their home conditions are bad, food inadequate or improper, or both, and in spite of the fact that there is a bath in every home, cleanliness is not always their strong point.

It must be stated that there are in this village a large number to whom these observations do not apply; well-conducted and well-cared-for families, clean and respectable, and well fed. It can readily be believed, however, that with conditions outlined above, there are more than the usual number of ill-nourished children and a higher percentage of medical defects than one is accustomed to find in Kent.

Many of the children had wholly or partly escaped medical inspection and more or less dodged the remedial measures that should have resulted therefrom.

At my first visit to the junior school five years ago on my first day I examined forty-seven children.

Two only of these were free from all defect. The remaining forty-five had 137 defects between them, an average of three to each child.

There were numerous cases of defective teeth, tonsils and adenoids, impetigo, skin rashes, defective clothing and footgear, and dirt.

I cannot remember anything like it in my experience of medical inspection before or since, and it is not like that to-day.

For the last two years a regular weekly clinic has been held and children are referred from various sources. A nurse devotes part of her time to it

and looks up the cases in their homes if necessary. I am in attendance every Saturday morning; 321 children in 1933 and 326 in 1934 were treated, many of these for more than one condition and for severe periods and some during the whole year. The four conditions most often found at the clinic are :—

Malnutrition.
Impetigo and scabies.
Minor injuries.
Rheumatism in some form or other.

Many of these cases would escape treatment if the clinic did not exist, and quite a number do now in fact escape treatment.

Malnutrition.—Ancillary nourishment is given where necessary and open-air schools are recommended in certain cases. There is, as far as I know, no way for a poor child to get malt and oil without payment except at the clinic.

Impetigo.—Numerous children had been absent for months with this condition, and certain cases for nearly a year, until they were brought to the clinic for treatment.

The ignorant regard it as the result of a cold and rub in ointment without any precaution against re-infection. Ointment is useless without instructions.

Scabies.—The same applies. Cases have persisted for months. Pounds of sulphur ointment had been rubbed in and the scratches re-infected by the resumption of infected clothing.

Minor Injuries.—These are more often than not neglected. Our classic instance is a boy who, falling down, made an abrasion over the kneecap about the size of a florin. When he came to the clinic more than a year afterwards it was still unhealed. Its only treatment as far as we could ascertain had been bread poultices. Indeed bread poultices are the great therapeutic standby in Aylesham.

Rheumatism.—Numerous cases have been dealt with. In children this is often a disease of malnutrition and bad conditions, and there is no need for me to stress its importance.

It is obvious from the few instances given above that school attendance is seriously affected by neglect to obtain treatment for these minor ailments. When I took charge of the district and clinic two years ago, there were 120 children absent at every session, leaving an average attendance of 88 per cent.

There can be no doubt that regular medical inspection and a weekly clinic have produced an immense change for the better in the general condition of children in this village.

School attendance is improved, the general standard of cleanliness is astonishingly raised. Impetigo cases, septic sores, scabies and the like are for the most part promptly treated and their subjects restored to school attendance.

The Committee's dental and tonsils and adenoids schemes have been largely made use of, and the Tuberculosis Dispensary, with open-air schools and ancillary nourishment, have all contributed.

Statistical proof might be adduced, but no one who knew the schools at the commencement of the work can fail to be impressed by the great improvement that medical inspection has effected. It "leaps to the eyes" of managers, teachers and visitors alike, and I have written this report to bring to your notice this concrete example of the unquestioned benefits of the national scheme.

Its beneficial possibilities are in Aylesham by no means exhausted if ways and means would permit of an extended and more efficient service.

Daily clinics at the school, the full time activity of the nurse for school work and the other medical services and full co-operation of all concerned would incalculably increase the good already done.

APPENDIX XII

BED WETTING

Note by Miss A. M. Maynard, Quedley Hospital, Haslemere

DURING the last six months that we have treated enuresis at this hospital almost every case has been cured temporarily, and many permanently. For those who are good enough to have the children back and continue the treatment there is no reason why all the cures should not be permanent.

The patients show a clean record for a month before leaving, but bad habits, sometimes of many years standing, easily return unless the incentive to effort is kept up.

No medicine or physical treatment will be of any use unless the child is really anxious to get well, and unless he believes he will. The majority of patients, when they come to us, have been taught to believe they cannot help it, and so we use a new medicine to provide a reason for a change of opinion.

We say : " No one wants a boy with this terrible habit, but you will find this medicine will stop the irritability, and enable you in quite a short time to overcome it, provided :

you do not drink after tea,
or forget to go to the lavatory last thing,
or play with those parts."

All the children have pots under their beds. The little ones have regular times all through the day (this ought to have begun at birth), but our doctor does not believe in lifting them at night as he says the trouble is rarely caused by an overfull bladder, and he certainly has proved this point ; even the 4-year-olds here last 12 hours ; those who cannot, should walk to the lavatory, not just be lifted, for what they do half awake, in a short time they will do fast asleep.

We must remember that, whether this complaint comes from bad training, bad home environment, or hereditary weakness, or from all three, it is at least not the fault of the child. The child is no longer conscious when he wets his bed, nor aware of his subsequent wet sheet, therefore to shame or punish him as for deliberate wrong-doing is useless and often increases the trouble. Yet to let him think it cannot be helped is equally wrong, for in the end it is he who is going to help it.

Tell him the body in sleep will obey the orders given it when awake. The milkman wakes at 4.30 to arise without an alarm, but the lazy man who has an alarm and turns over to sleep again after it has sounded will the next night not hear it.

The peculiar difficulty in dealing with this complaint is because the causes are so many and so mixed. Let us take it from the physical side first.

There are medicines to stop the irritability and others to check the amount. Before consulting a doctor find out the answers to these questions :

1. Is the amount passed at night or in the early morning unusually large ?
These cases, which are rare, will benefit by being wakened at night and made to walk to the lavatory ; avoid just lifting them on to a chamber, for what they do half awake, in a short time they will do fast asleep. But if, when rousing a child at 10 P.M., you find the bed already wet, it is obviously not the result of an overfull bladder.

2. Is he continually going to the lavatory in the day time ?
3. Are there any worms in his stools ?
4. What is his family and previous history in regard to this habit ?

ON THE CHARACTER SIDE

Habits are very hard to cure even when we are awake, and doubly so when asleep, but nevertheless, given sufficient incentive, it is possible. Let them realise that you know they are up against a big thing. Start with rewards and encouragements of all kinds, and when they have broken the habit for, say, a month, relapses have to be watched for and checked according to temperament and character.

Treatment must depend on the cause, and this varies so much that a few common types are given which help when observing the patient.

(a) *The delicate, highly-strung child*

Look for signs of bitten finger-nails, night walking or excitability. Confidence is essential, success should be made much of, failures explained away, so that he may still believe he is improving. When failure is frequent, he may chalk in red the dry nights on the calendar, and for a red week give a treat, until a new habit begins to be established, then, as with all other types, it should pay to be good, and failure should automatically cause him trouble—but not the loss of friendship of his guardian.

(b) *The child with fears*

It must be remembered that some children have quite definite and inexplicable fears, which may have caused the trouble. If these can be discovered by observation or sympathetic questioning, half the battle is won.

The fear of the dark can be so great as to prevent a child using a pot placed under his bed, or going along the dark passage in the daytime ; or they may fear the mocking of their companions so much that what they try to avoid happens again, because their mind is concentrated on it. These children need mothering and encouraging. Tell them that though it has happened once more, they are better and if they keep trying will soon be well. A child's prayer has cured him more than once. These children easily accept suggestions.

(c) *The Egoist*

This child enjoys all forms of self indulgence ; never helps in the house except under pressure, and then does housework so badly that he hopes not to be asked again. Such a child will be indifferent to the trouble he causes and can only be cured by finding that his wet sheets seriously interfere with his pleasures. He should be made to wash them, or if this is impossible, have to undertake a serious piece of work, such as washing up tea things, to make up for the time spent over his sheets. Accept his statement that he cannot help it, but tell him less excitements, earlier in bed, simpler food will help him. These things should be the invariable result of his relapse, unaccompanied by any scolding or argument. Thus he would know that when it happens he has so much extra work, goes without jam, and goes to bed for 2 or 3 days an hour earlier, then equally certainly if he does well he is given a fresh start, and because everyone is more or less of an egoist and has more power over himself than he realises, this treatment will be found useful in nearly all cases.

It is from this type we get most of our relapses, and they sometimes seem to enjoy being a problem to the community.

(d) *The product of bad home conditions*

Six people sharing a bedroom with only one chamber and the lavatory in the yard, children locked in a room for hours, complete apathy on the part

of the parents; these are some of the conditions from which we have had patients, and if we can prevent them returning home and cure their complaint we are doing a national work, even if more trying and not so spectacular as some.

The child will not draw out our sympathy by being humble about his faults or grateful for our nice clean houses; he is tough, noisy, indifferent to dirt, smells and discomforts, and feels strangely lonely for our fragility, sympathy, tender caresses.

Tell him he is filthy, that even dogs and cats don't foul their homes, only animals living; he needs no telling things are different here; what he needs is a friend who will give him the power to make his adjustments. No one can condemn for long or look down upon himself, and we revenge ourselves on those who try to make us do so, by borrowing of our frailty and ridiculing their virtues. "Two such patients owned that, not only did they sell their beds, but their clothes too," "Because it made her mad; she hated us," they said. "Never once did they transgress in the hospital, though for the first six hours they tried to live up to their name 'the bad twins'." The next day, however, the joy of doing jobs and being a needed part of the family finished the reformation.

Wandering energies; threats they look upon as weakness (which they generally are, and that is one of the things they must despise). Gentleness and kindness may at first seem to them the same as weakness until they see that disobedience receives some immediate punishment; it is not the size, it is the certainty that counts.

For a small child, if he is sitting, make him stand; if standing, sit. For an older child, place your first battle with care; don't order him upstairs, unless you are prepared to carry him there if necessary. Don't say, "Drink your beer," for we cannot force people to drink or eat, but we can remove the bread and jam and say people who waste food must go hungry until they learn not to. If delay in obeying is met with a short banishment, deliberate disobedience will probably never occur.

You must win the first battle and they want you to; no one will follow weakness, and no one is so whole-heartedly loyal when once you have their respect, as these resolute children. Then you will cure not just one symptom, but the whole child, and from his belief in you, and your belief in him, he will come to believe in himself.

APPENDIX XIII

HEALTH EDUCATION

Extract from the Report on the work of the School Medical Service,
Liverpool, 1938, pp. 141-4

The following extracts from the Report of one of H.M. Inspectors of the Board of Education, dealing with Health Education in a public elementary school, demonstrate the great value of the co-operation of a head teacher in assisting the School Medical Department.

"This school for 400 Junior Boys and Girls was opened five years ago (August 1933) in a new housing estate on the outskirts of the city. All the houses of the estate had baths, electric lighting, hot water and small gardens. The rents were low to accommodate the lower working class and the unemployed; at that time about 50 per cent. of the parents were partially or totally unemployed. The families were drawn from many parts of the city.

"The school enrolled 350 children at once and in a few months the number reached 400, from which it has not dropped, nor has this number

ever been exceeded despite pressure from parents. Many of the children had been out of school, unkempt and untaught, for periods up to twelve months. Children arrived at school late, dirty, and slovenly in dress and speech. The school recognised at once that it would be of service to the district as a centre of social improvement.

"Health Education.—A circular letter to parents pointing out the advantages of cleanliness and the formation of good personal habits was at once drafted and distributed. They were told that in the course of time a clean neighbour would be guaranteed to every child who arrived at the school vermin free, clean and well groomed.

"Daily inspection at 9 A.M. of every child followed—a practice which is still kept up. First, exposed parts, knees, face, neck, hair and hands; then clothes, boots, handkerchiefs, and finally *teeth*. Now every child carries a handkerchief (one is supplied for the odd day if forgotten by the child) and every child can be inspected from head to foot with confidence.

"The second bi-monthly circular dealt with the next step in the Health Education programme, the securing of a serious attitude in parent and child on the *care of the teeth*. Toothbrushes were shown at the school, and were also bought from the school for 2d. each (bought by the school wholesale for 2s. 6d. per dozen).

"Co-operation with School Medical Service.—The senior medical officer was interviewed by the head master and the special needs of the district were emphasised. This year 97 per cent. of the children recommended for dental treatment accepted. (The average acceptance for the city is, it is understood, about 50 per cent.)

"The school co-operates wholeheartedly with the Authority's medical service. Notes are taken on all cases recommended for treatment by the medical officer. There is a weekly check on all who should be wearing glasses and on those recommended for adenoid and tonsil treatment, and parents are interviewed by the head master to facilitate their approach to the medical officer.

"Health and Training in Schools.—Side by side with the individual inspection, hygiene lessons on the simple rules of health—on the lines of the Board of Education Handbook of Suggestions on Health Education—were put on the time table. (The Handbook has proved of great value here in stimulating and guiding young teachers.) No untidy child is allowed to sit in the classroom. The school rule is :

- 'To the blacking box and clean your shoes.
- To the wash-basin for a wash and brush-up.
- To the cloakroom and brush your clothes.'

Soap, nail-brushes, mirrors, boot and clothes brushes are provided. Nose-breathing drill is taken to counteract the mouth-breathing habit. Towels are changed daily. Credits in the House system are given for appearance, posture and carriage. On wet days care is taken in seeing the children change into dry pumps; raincoats are taken home each night; 'sunshine' play periods make up for games periods lost in bad weather. Posters depicting healthy children and illustrating healthy habits are displayed and are continuously changed. In winter delicate girls and boys are encouraged to bring loose pull-overs which are hung on small hooks near the classroom door and slipped on before going out into the yard with its 20 degrees drop in temperature. On the recommendation of the medical officer, long stockings are insisted on for girls from October to April. The head master buys stockings wholesale at 12s. 11d. per dozen, and these are sold at 10d. per pair.

" Milk and Free Meals.—Establishment of a Free Meals Centre in the school. The benefits of regular daily milk as a food for children were emphasised in circular letters to the parents until the habit of taking milk daily at school was firmly established. To-day 380 children out of a roll of 400 take milk regularly; 62 have milk both morning and afternoon.

" Exercises.—In consultation with the school medical officer a series of corrective and abdominal exercises were drawn up; all the children are exercised in the open air on fine mornings from 9 to 9.15. The boys are taken in one group and the girls in another. Horizontal position exercises are taken on plyboard stretchers and a display is given before the parents each summer. The physical training course includes regular lessons from the Board's syllabus, games, both during and after school hours, dancing and swimming.

" Co-operation with the Parents.—The outstanding achievements of the school in practical health education could not have been made without close and effective co-operation between the school and the parents. This co-operation is secured in the following ways :—

- " 1. The head master circulates a monthly or bi-monthly letter to every parent.
- " 2. The school is always open to parents. They are frequently reminded of this in the letters. Parents are interviewed daily from 4-5.30 P.M.
- " 3. There are a number of Open Days—and parents often accept invitations to Morning Service (attended by the lower half of the school one day and the upper half the next, so there is always room for parents), lantern lectures, music hours, drama festivals (twice a year—350 parents were present at the Festival in May this year), and physical training exhibitions.
- " 4. Other activities in which parents co-operate are: the School Saving Society; Collections for Dr. Barnardo's Homes, and for Disabled Soldiers and Sailors; Boot Club; the Summer Camp in the Isle of Man; Adoption of Children for Milk Meals; and the Collection and Distribution of Clothing.

" Conclusion.—Clearly, Health Education is given a very prominent place in the life of this school. The occasional visitor cannot fully estimate the full extent of its influence, but the marked improvement in the pupils' personal cleanliness and their general spirit of vitality are obvious. The numerous letters of appreciation sent by the parents show that they are alive to the value of the work which the school and the Medical Service are doing.

" The re-housing of the people on the scale on which it has been undertaken in Liverpool presents many problems; if their new surroundings are to bring to the people the improvements in habits and outlook and in the prospects of the next generation which it is universally hoped they will bring, such work as has been described here is clearly social work of high value, indeed it may, without any exaggeration, be called essential. The results achieved here are not achieved without hard work and co-operation between all concerned, and it is in the belief that these results and the methods used here deserve to be more widely known that this report has been written."

APPENDIX XIV

COMPARISON BETWEEN MORTALITY RATES IN THE NORTHERN AND OTHER TOWNS

Extract from the Registrar-General's Statistical Review of England and Wales for the year 1937, p. 26

. . . a comparison of the northern towns with those in the south-east, east or south-west is made below for populations of two sizes by taking the simple arithmetic mean of the mortality figures of the areas included.

Average S.M.R.¹ of Towns of the size and position specified

	50 to 100 thousand population.			100 to 250 thousand population.		
	1935.	1936.	1937.	1935.	1936.	1937.
Northern regions :						
County boroughs . . .	117	117	116	125	123	126
Other towns . . .	114	112	117	—	—	—
South-east (excluding Greater London), East and South-West :						
County boroughs . . .	92	93	92	95	95	94
Other towns . . .	90	90	87	—	—	—

These ratios show that county borough status, with all which that implies in methods of health administration, does not necessarily result in lower death rates than obtain in similar towns without such status, but it must be remembered that most of the county boroughs are old-established industrial towns with densities of population usually higher than in other towns, many of which have grown out of suburban or residential areas. It is also evident that there has been during the last three years an excess of mortality in Northern over that in Southern towns of the same size amounting to 25 or 30 per cent. ; in 1937 it was 26 and 35 per cent. in the two groups of county boroughs and 34 per cent. in the other towns of 50,000 population or over. This phenomenon has been noticed ever since mortality statistics have been obtainable, but its persistence, which must be due in the main to factors which are remediable, such as smoke, overcrowding and under-nutrition, indicates that much remains to be done before the state of health in our Northern towns can be regarded with complacency.

¹ Standardized mortality ratio.

INDEX

- ABLUTION habits of schoolchildren, 94
 Advertising, 22, 44
 Agricultural Wages (Regulation) Bill, xv
 America, classless education in, 106
 factory hygiene in, 100
 Amusements, children's, 22, 23
 Anderson Committee, 1
 Anthropometric standards, 30-1
 Anti-Noise League, 28
 Approved Societies, 23
 Ascertainment of lice in school children, 67-8, 128-9
 Assistance Board, 12, 21
 Assurance, burial, 11-12
- BAGOT, J. H. : *Juvenile Delinquency*, 50-1
 Bag-wash, use of, 61
 Baths, provision of, 94
 Batten, Dr., 35-7, 38 n.
 Bed bug, the, 27
 Bedding and bedclothes, 64
 Bed wetting. *See* Enuresis
 Bermondsey schoolboys in 1894... 102
 Birmingham, 7, 31-3, 35, 57, 78, 79, 116-22
 Bodily dirtiness, 91-7
 Booth, C. : *London Life and Labour*, xiii, xiv, 6, 22, 55
 Bootle, 87, 106
 Boots and shoes, purchase and repair of, 61-2, 65
 Breakfast, children missing, 25-6
 Browne and Ford-Smith : *Nocturnal Enuresis*, 83
 Bunning, Mr. Stuart, 75
 Burt, Professor Cyril : *The Young Delinquent*, 49-51
- CANVASSING, door-to-door, 11, 12, 23, 56, 58-9
 Carr - Saunders, Mannheim and Rhodes, *Young Delinquents*, 51 n.
 Casual employment, 10, 33, 56
 Cathcart, Professor, 31 n.
 Central Council for Health Education, 28, 45, 76
- Charles, Dr., 35
 Cheshire, 2, 7
 Chester, 7
 Child guidance, 111
 neglect, treatment of, 52-3, 108
 Children's allowances, xviii, 105
 Cinemas, attendance by children, 22, 23
 Clarke, Dr., 24-5
 Clothing, 9, 54-65
 clubs, 56-9, 124-6
 Clubs, Mutual Service, 60, 65, 109
 parents', 109
 provision of food and drink in, 17
 working women's, xix, 109
 "Comics", 22, 23
 Communal cooking, 41-3, 45
 Cookery teaching, 44-5, 122-3
 Cooper-Hodgson, Miss : Note on vermin, 72, 128-30
 Note on derelict families, 130
 Co-operative Societies, 57, 64
 Coulsdon and Purley, vital statistics, xv
 Credit trading, 21-3, 33, 56, 58-9, 64
- DAY Continuation Schools, 73
 Delinquency, juvenile, xiii, 46-52, 103-4
 Denby, Elizabeth : *Europe Rehoused*, 12 n., 73, 130-1
 Derelict families. *See* Problem families
 Diseases of dirt, 92
 Disobedience and indiscipline, 53
 Distribution of Industrial Population, Report of Royal Commission on, xv n.
 Domestic affairs, suggestion for an Institute of, 64
 Domestic Science Teachers, Association of, 46, 122-3
 Dorset, skin disease in school children, 80
 Drinking habits, 13-17
 Dull and backward child, 34, 39, 51, 53, 103
 Durham and Northumberland, 8, 45, 103

- EASINGTON, xii
 Education, xvii, xix, 104-10
 Biology and Hygiene teaching, 99
 Cookery teaching, 44-5
 Needlework teaching, 63, 65
 Nursery Schools, xvii, 28, 38, 37,
 89-91, 104-10, 121-2
 Parents' attitude to, 5
 Education, Board of, 7, 23, 31, 34,
 43, 45, 63, 65, 67, 72, 75-6, 79, 80,
 89, 92, 95-6, 97, 98, 103, 107
 Employment, education through,
 108
 for girls, need to widen field, xvii
 Enuresis, 4, 5, 81-91, 134-6
 Environment, recommendations for
 improving, 110-11
 Essex, 2, 7, 77, 82
 Evacuation, 1-8
Evacuation Survey, by Padley and
 Cole, 2 n.
 Evans, Owen E.: *Redeeming the
 Time*, 73
- FACTORIES (Medical and Welfare
 Services) Order, 99, 100
 Faecal incontinence, 81, 87
 Fleas, 67
- GAMBLING, 12-13, 23
 Gill, Dr. Samuel, xx, 82 sq.
Girls Growing Up, by G. H. Jeph-
 cott, 22
 Glover, Dr. J. Alison, xx, 77
 Gourlay, Dr. Elizabeth, 33
 Grimsby, 54, 67
Growing up in Shoreditch, 27, 47, 88,
 93
- HAIRDRESSING establishments, 76
 Health Centres, 81
Health Education, 98
 Health, Ministry of, 2 n., 27, 66, 72,
 75, 80, 91, 100
 "Health of the School Child", 7,
 30, 31, 67, 68, 79
 Health Visitors, 28, 74, 81, 87, 89,
 100-1
 Hebburn, xii
 Hertfordshire, 2, 7, 8
 Hire purchase. *See* Credit trading
 Holiday camps : commercial, 76, 85
 school, 60, 107
 Holidays, children's, 1, 7, 47
- Homecraft teaching, 44-5, 63, 65
Home Market, The, 111
 Home needlework, 59-60
 Home Office, 76, 85
 Homes, bad, 37, 121
 Housing : bad, and malnutrition, 36
 baths, provision of, 94
 food storage and cooking facilities,
 40-41
 infestation by bed bugs, 27
 landlord, duties of, etc., 110
 making-down of property, 110
 overcrowding, 51, 103
 Overcrowding Survey, xii
 sanitary accommodation, 87 sq.
 sleeping accommodation, 27
 slum tenement, a typical, 93
 water supply and heating, 93-4
 Hull, 7, 8, 54, 67, 92, 95
- IMPETIGO, 77-9, 92
 Indictable offences by juveniles, 48-
 49
 Industry : medical provision in, 73
 social responsibility of, xviii, xix
 Infestation, verminous. *See* Bed
 bug, Fleas, Lice
 Insanitary habits, 81-91
 Insurance, burial, 11-12
Introduction to Criminal Statistics,
 50
 Itch, the. *See* Scabies
- JUNIOR Instruction Centres, 73, 98
 Juvenile delinquency, xiii, 46-52,
 103-4
- KENT, 2, 24, 43, 94
- LABOUR AND NATIONAL SERVICE,
 Ministry of, xx, 61, 85
 Lancashire, 2, 7, 8, 39, 83 n.
 Leeds and Bradford, 2
 Leslie, Miss Cecil, 29, 30, 84 sq.
 Lice, body, 5 n., 67
 head, xvii, 5 n., 27, 66-76, 92, 102
Life and Labour in London, by C.
 Booth, v, 6
 Liverpool, xii, 2, 5, 7, 36-7, 50-51,
 73, 96, 106 n., 136
 Loan clubs, public-house, 20
 Local government, future of, 101
 London : bag-wash in, 61
 expenditure on drink, 13, 14 sq.
 juvenile delinquency, 44-91
 overcrowding, xii

- London : sanitation, 88
 water supply, 18
 London County Council :
 area evacuable, 1
 evacuated children, enuresis in,
 82 sq.
 head lice in, 5 n.
 Nutrition Centres, 27, 32
 pamphlet on sleep, 25
 scabies cases treated, 8
 school children found verminous,
 7, 68
 clothing of, 54-5
 school premises, 95
 statistics, presentation of, 126-7
 Lying, 53
 MACLEOD, Dr. : *Diseases of the Skin*,
 76, 79, 80
 "Make and Mend", 60
 Manchester, 2, 7, 54, 67
 Maternity and Child Welfare Ser-
 vices, 28, 46, 65, 72, 161
 Medical services in factories, 99
 Medical Planning Committee,
 B.M.A., Interim Report of, 81 n.
 Mellanby, Dr. Kenneth : *Incidence*
 of Head Lice in England, xx, 5, 6,
 7-8, 68-73
 Menstruation, 97-9
 Mental Deficiency Committee, Re-
 port of, xiii n., 39 n.
 Merseyside, xv, 106
Merseyside, Handbook of Social
Statistics for, 106
 Middlesbrough, 7, 8, 78
 Moneylending, 18-21, 23
 Morgan, Dr., 33, 35
 Morris and Titmuss : *Epidemiology*
 of Juvenile Rheumatism, xv
 NATIONAL Council of Social Service,
 60, 109
 Federation of Women's Insti-
 tutes, xi
 Health Insurance Benefits, ad-
 ministration of, 11, 23
 Society for the Prevention of
 Cruelty to Children, 52, 123
 Needlework teaching, 63, 65, 122-3
 Neville, Miss E., 16
New Survey of London Life and
Labour, xiv, 4, 13-14, 40, 94,
 114-16
 Newcastle-on-Tyne, 35, 36-7, 54,
 61, 73, 78, 79 n.
 Dispensary, 61
 Northampton, 7, 77-8, 87
 Northamptonshire, 2, 7
 Northumberland and Durham, xii,
 45, 103
 Nursery helpers, 90-1
 Nursery schools. *See* Education
 Nutrition, 30-43, 116-21
Nutrition and Size of Family, 33
 OLD people, 74
 Orr, Sir J. Boyd : *Food, Health and*
 Income, xv, 31
 Oslo meal, 39-40, 46
Our Wartime Guests, 5, 92
 Overcrowding, xvi, 27, 37
 and delinquency, 51
 in schools, 79
Overcrowding Survey, xii
 PARENTS, co-operation with schools,
 65, 109, 131, 138
 Parliamentary debates, 72, 96, 106
 Patent medicines, 22
 Pawning, 21, 23
 Peake, Dr. Cicely, 26, 33
 Pediculosis. *See* Lice
 P.E.P., *Planning*, 10 n.
 Physical exercise and cleanliness, 87
 Pilfering. *See* Juvenile delinquency
 Pocket-money, children's, 22
 Police, Metropolitan Commissioner
 of, Reports, 44-9
 Poor Law Homes, enuresis in, 85
 Porter, Dr. L. A., 39 n.
 Portsmouth, 2, 7
 Poverty, xv, 32-3, 102-5
 Powell, Dr., 25-6
 Premises for clubs, shortage of, 103
 Prices, control of, 43, 45
 Probation, 51, 111
 Problem families, xiii, xiv, 51-3, 100,
 123, 130
 Property Managers, employment of,
 110
 Proprietary foods, 22
 Psychological study of poverty, 53
 Public-house, the, 14 sq., 16 sq., 20,
 23, 45
 Public-House Trust Companies, 16,
 43
 REFORMED Public-House Associa-
 tion, 42
 Register of landlords, suggested, 110
 Registrar-General, xv, 103

- Restaurant Public-Houses Association, 16
 Restaurants in poor quarters, need for, 41-3, 45
 Ringworm, 92
 Roding School experiment, 26, 29
 Rowntree, B. S.: *How the Labourer Lives*, xv n.
 Poverty and Progress, 14, 104
 Rudeness, complaints of, 53
 Rural life, advantages of, 6, 9
 Russia, factory hygiene in, 100

 SAMUEL, Viscount, on Education, 106
 Sanitary inspection, 74, 88, 91
 Sanitary towels, manufacture of, 100
 Sanitary training in schools, 89
 Sanitation, domestic, 87-91
 Savings arrangements, 12
 Scabies, 27, 78-9, 92
 School age, extension of, 108
 meals, 45-6
 Medical Officers, training of, 46, 72
 nurses, 67 sq., 72, 74
 Schools, sanitation in, 90, 91, 95-7
 secondary, nutrition in, 5, 36
 size of classes in, 106
 Scotland, classless education in, 106
 Second-hand clothing, 76
 Sex instruction, 99
 delinquency, 58
 Sheffield, xv, 2, 79, 92
 Sheldon, Dr. W., 85 n.
 "Shelter-rash." See Scabies
 Shoreditch, 27, 88, 93-4
 Sickness, poverty and, 33, 103
 Simey, Professor, 5, 92
 Size of family, effects of, 31, 51
 Skin diseases, 76-81
 Sleep, habits of, xvi, 23-8
 Social medicine, training in, 32
 problem group, xiii
 research by government departments, need for, xx
 studies, training in, xx
 survey, need for a national, xiii
 Soiling. See Faecal incontinence
 Somerset, 2
 Southampton, xv, 2, 7
 Spence, Dr., 35

 Stableforth, Dr. Gladys, 24, 94
 Standards of price and quality, suggested, 64
 Statistical presentation of infestation, etc., 67, 76, 79, 126-7, 128-9
 "Submerged tenth," the, xiii, xiv, xvii, 5
 Suffolk, 2, 8, 66, 79
 Surrey, 2, 82
 Sussex, 2, 7, 8
 Swearing, 52-3
 Sweets, children's, 22, 29-30, 34, 43-4

 TEACHERS' Training Colleges, 71, 90
 Teaching, conditions of, 107
 Tees-side, 2
 Thomas, Dr. C. J., 102
 Times, The, 12, 71
 Titmuss: *Poverty and Population*, xi, xiii, 26 n., 31 n., 39, 103, 111
 Towns, population living in, 111
 Tyneside and Sunderland, 2

 UNDER fives, 72, 104-5
 Unemployment, 4, 9, 20-1, 50, 57

 VERMIN. See Bed bug, Fleas, Lice
 Vital statistics, xiv, xv, 103

 WAGES, xviii
 Walthamstow, School Medical Officer's Reports, 24-5
 West Riding, nutrition in towns and country, 37
 Willesden, vital statistics, xiv
 Witnesses, xii, 114
 Witts, Professor, xx
 Wolverson, Dr., Medical inspection at Aylesham, 132
 Women's Clubs, 65
 Women's Institutes, xi, 87
 Working-Class Wives, 88
 Wrong spending, xiii, 9-23

 YORK, 14 sq., 104

 ZONING, 1, 2

**THIS BOOK IS PRODUCED IN COMPLETE CONFORMITY
WITH THE AUTHORIZED ECONOMY
STANDARDS**

*Printed in England at THE BALLANTYNE PRESS by
SPOTTISWOODE, BALLANTYNE & CO. LTD.
Colchester, London & Eton*

